



Investigating Menstrual Hygiene Facilities and Education Opportunities for Female Learners in the Western Cape

By

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Dedication

To my mother Jennifer Sibongile Chigome, who during the toughest of times, dedicated her life to providing educational opportunities to her three sons.

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I am remarkably grateful to so many people for the assistance, support and guidance that I received whilst completing my Masters by dissertation. The truth is, none of this would have been possible without the support I received throughout this two-year journey.

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Abstract

The completed study investigated menstrual hygiene facilities and the related education opportunities presented for female learners in selected primary and secondary schools in the Ocean View area of the Western Cape Province of South Africa. Despite female learners' school enrolment having improved in the region in recent years, large gender inequality gaps in primary education still exist and are even more evident in secondary education.

In South Africa, menstrual hygiene and the inability of female learners to go to school when they are experiencing their periods is not just a sanitation issue, nor is it a physiological one. Rather, it is something that has wider socio-economic implications with historical connotations, given where this country has come from. Furthermore, this study attempted to address some of the gaps in existing, theoretical knowledge and policies, particularly social and educational policy, by investigating how menstruation and puberty-related challenges in the context of poor sanitation and menstrual hygiene facilities were exacerbating gender inequalities in the South African education system.

A qualitative research design was used to gain an enriched understanding of the female learners' perceptions and experiences regarding the state of the menstrual hygiene facilities at their schools and the influence of these facilities on their educational opportunities.

This study highlights that menstrual hygiene management continues to receive limited attention in government policies, research priorities, programmes and resource allocation, and the information available to the public tends to be informed by anecdotal evidence. Moreover, most sanitation and hygiene interventions in developing countries are failing to address all needs required for female learners to manage menstruation appropriately in the school environment. Further, sanitation facility design usually does not address the specific needs of women and the girl child.

The research findings from the study completed shows that inadequate sanitation and menstrual hygiene facilities impedes the female learners' ability to make the most of their education opportunities. Consequently, the study suggests that there is a need for a

comprehensive social policy approach to address the identified gaps in policies related to menstrual hygiene management in the South African school environment.

List of Acronyms

ANC: African National Congress

DA: Democratic Alliance

EE: Equal Education

EMIS: Education Management Information System

GDP: Gross Domestic Product

GEAR: Growth, Employment and Redistribution

GNP: Gross National Product

HPV: Human papillomavirus

MDG: Millennium Development Goals

MHM: Menstrual Hygiene Management

NGO: Non-Governmental Organisation

NSC: National Senior Certificate

RDP: Reconstruction and Development Programme

SDG: Sustainable Development Goals

STATSA: Statistics South Africa

UCT: University of Cape Town

UNESCO: United Nations Educational, Scientific and Cultural Organization

UNICEF: United Nations International Children's Emergency Fund

UTI: Urinary Tract Infections

WB: World bank

WHO: World Health Organisation

WID: Women in Development

1 Introduction

In South Africa, there have been increasing calls for government to focus on improving girls' education. Schools throughout South Africa continue to lack basic water and sanitation resources that are constituted as essential for adolescent girls' well-being. Sommer (2010:269) notes that "on a monthly basis, girls must manage their personal menstrual hygiene needs in school environments that frequently lack adequate toilet facilities, a sufficient supply of easily accessible and clean water, and a mechanism for the disposal of used sanitary materials in a private and culturally appropriate way."

Menstrual hygiene and the inability of South African female learners to go to school when they are undergoing their periods is not just a sanitation issue or a physiological one. Rather, it is something that has wider socio-economic implications, as well as historical connotations given where this country has come from. Although 1994 marked the year of democratisation that granted each South African with a wide array of political freedoms, social justice for the vast majority of female learners remains a challenge, as the post-democratic government is failing to address the inadequate, and often complete lack of, menstrual hygiene facilities that were prevalent during the previous colonial and apartheid system.

In light of the above sentiments, the aim of the study was to investigate whether inadequate or no menstrual hygiene facilities at schools contributed to high levels of absenteeism amongst female learners in schools in the Ocean View area and greater Western Cape. In terms of the study completed, Menstrual Hygiene Facilities refers to clean and private sanitation facilities that allow for adequate menstrual hygiene management (Kirk and Sommer, 2006). The literature reviewed throughout of this study reveals that limited studies had been undertaken on the topic globally, and even less research had been completed on the topic in the Western Cape, particularly from a public policy or developmental perspective. Consequently, the researcher investigated menstrual hygiene facilities at schools in the Ocean View area with the view of determining whether the said facilities had any influence on the issue of absenteeism amongst female learners. The other intention of the study was to generate new knowledge, which would possibly contribute to public policy development so that tangible actions could be taken by the authorities to address inadequate menstrual hygiene management (MHM) at schools. It was assumed that such action would positively impact the educational opportunities of female learners.

In light of the above, this study undertook a qualitative approach and primarily made use of interviews in order to investigate menstrual hygiene facilities and the related education opportunities presented

for female learners in selected primary and secondary schools in the Ocean View area of the Western Cape Province of South Africa. This chapter includes the context and statement of the problem, the rationale and significance of the study, the research questions, and the research objectives. This chapter also explains important terms and concepts used throughout the paper.

This study was completed under the supervision of a lecturer at the University of Cape Town (UCT) in the Department of Social Development. The title and objectives were provided by the Master's student under the administration of the selected supervisor. Thereafter, the pilot study, which included an interview schedule, was discussed and agreed upon between the student and the supervisor. The remainder of the study was conducted and written up by the student.

1.1 Statement of the problem

An educated population is fundamental to meeting the Sustainable Development Goals (SDGs) and national development priorities. It is critical to a functioning education system which is important for the long-term stability of society. A good education system is crucial, not only for ensuring that the residents of a nation are later employable, but also for the human development and the maintenance of socially responsive economic and political systems. Furthermore, despite the fact that South Africa spends close to 20 per cent of its annual budget on education, the education system remains inadequate (Modisaotsile, 2012:1).

According to Gopal and Ngubeni (2016) "it is indisputable that the state of basic education in South Africa is dismal." The National Minister of Basic Education in South Africa Angie Motshekga, openly admitted that she was shocked at the quality of educational services being delivered to former previously disadvantaged schools in particular, highlighting the widespread lack of textbooks and inadequate infrastructure as key issues. Furthermore, the Minister described the basic education system as comprising "a Cinderella system deprived of resources and characterised by pockets of disasters... akin to a national crisis" (Global and Ngubeni, 2016).

Providing female learners with an education is widely considered an unequivocal public good; the corresponding assumption being that a greater number of females enrolled in schools will lead to accelerated progress in achieving gender-equitable education. However, several debates concerning educational opportunities for female learners have exposed that educational content, delivery and the environment perpetuate and generate gender inequities at schools (Klasen, 2002).

The literature reviewed by the researcher suggests that female learners in sub-Saharan Africa face disproportionately higher difficulties acquiring an education than their male counterparts. Although girls' school enrolment ratios in the region have increased in more recent years, large gender

inequality gaps in primary education still exist and are even more evident in secondary education. In order to explain these gaps, special attention was drawn to the links between poor school-based sanitation/menstrual hygiene facilities and the related educational opportunities presented to these respective learners (Klasen, 2002).

A number of small studies have been conducted in African countries on the effect of menstruation on girls' school attendance. However, the situation across the continent remains unknown. Furthermore, recent research is showing that in South Africa there is no information to show that girls are absent from school as a result of their periods (in fact in the Western Cape more boys are absent from school than girls). Although one can assume that inadequate menstrual hygiene management (MHM) affects the dignity, wellbeing and possibly the performance of female learners at school, there is not enough information to prove that this is, in fact, true. Therefore, in this context more research in this area is needed (Wilkinson, 2016:1).

The issue of female learners missing school due to poor menstrual hygiene has come under the spotlight in South Africa lately through humanitarian efforts by some celebrities who provided sanitary pads for female learners. There have been several campaigns launched by prominent South Africans to highlight the plight of female learners who are poor and cannot properly manage their menses every month whilst attending school. Despite such efforts being noble, they are *ad hoc* and not institutionalised. The problems around addressing menstrual hygiene and related facilities still persist (Sommer, 2010).

There are growing concerns that the work of non-governmental organisations (NGOs) and several other organisations will not be able to provide the resources necessary for girls to acquire equitable education over the long-term. A report by Bloomberg (2011) shows that there is increasingly poor Grade 12, commonly known as matric, output whilst enrolment rates remain high each year. The study that was undertaken shows the need for social policy to concentrate on the 'quality' of education and to address structural barriers in schools related to menstrual hygiene (Sommer, 2010).

In order to understand the challenges that female learners face regarding menstrual hygiene facilities in the Western Cape and greater South Africa, the study investigated the following:

- the views of female learners from the Ocean View area regarding the state of menstrual hygiene facilities at their respective schools;
- the quality and availability of toilets and adequate sanitation facilities and the influence that they were having on the girls' school attendance in the Ocean View area; and
- equal educational opportunities for female learners in general.

This study attempted to address some of the gaps in existing, theoretical knowledge and policies, especially social and educational policy, by investigating how menstruation and puberty-related challenges in the context of poor sanitation and menstrual hygiene facilities were helping to reproduce gender inequalities in the South African education system. The effectiveness of schemes and programmes that could address the matter were also explored.

1.2 Problem Context

Geographically, the study was undertaken and completed in the Cape Town Metropolitan Area, specifically in the suburb of Ocean View in the Southern Peninsula. According to Living Hope (2018) “the suburb was established in 1968 as a township for Coloured (mixed-raced) people who had been forcibly removed from so-called “white areas” such as Simon's Town, Noordhoek, Red Hill and Glencairn by the former Apartheid government under the Group Areas Act.” Historically, it was first called Slangkop and the first resident was moved to the area on 1 August 1968. It was ironically named Ocean View because residents were being removed from their previous sea-side homes and views. As a result, its history is embedded in Apartheid, and there is still much bitter resentment regarding the past injustices among many people living in the area (StatsSA, 2009).

Although it is almost 25 years since the end of Apartheid, many residents of Ocean View feel abandoned, with no hope or ambition for the future. According to residents of the area with whom the researcher came into contact, this attitude is a major cause for the many daily struggles faced by those living in Ocean View. Furthermore, youths and adults alike lack hope or the determination to improve their lives by getting an education or a job, so problems such as unemployment swell (Living Hope, 2018).

Ocean View has a number of facilities but is still ill-equipped for the needs of the community. For instance, current facilities include two primary schools, one high school, a library, community centre, clinic and a range of small shops. There are almost 200 churches and church groups within Ocean View, but these are limited in effectiveness by division and factions, and many live a Sunday-life focused on rules, and a week-life where they behave as they wish. The main language spoken within the township is Afrikaans, but most also speak English (Living Hope, 2018:1).

Although Ocean View is a community ravaged by social problems, some residents are beginning to take a stand-in an effort to fulfil the potential of the people living in the area that has been suppressed for decades (Living Hope, 2018).

1.3 Rationale/Significance of the Study

The researcher was prompted to embark upon this study in the Ocean View area because he had come into contact with several people in this community who raised concerns with regards to the negative impact that limited and inadequate menstrual hygiene facilities at schools posed for adolescent girls. It was also brought to the researcher's attention by community members that many female learners' educational opportunities had been impacted negatively due to their inability to properly manage their menstruation whilst at school. The community members were able to engage with the researcher because he had already been involved in community initiatives aimed at improving the livelihoods of its members.

After a preliminary review of literature, the researcher realised that limited studies had been undertaken on the topic globally. Furthermore, not much research had been completed on the topic in the Western Cape, particularly from a policy or developmental perspective. Consequently, he investigated menstrual hygiene facilities at schools in the Ocean View area, with the intention that the findings could result in the generation of new knowledge regarding this social problem, and that tangible actions could be taken by authorities to address inadequate MHM at schools and the related impact the issue has on educational opportunities.

Furthermore, the researcher was under the impression that the implementation of a policy could result in a standing programme which could effectively act as an incentive for female learners to not only attend school, but stay in school and not miss classes. Such programmes could aim to foster similar outcomes to those of the school feeding schemes already in place. As it is written by Department of Basic Education (2017) "The school feeding scheme – or as it is officially called: the National School Nutrition Programme – aims to foster better quality education by enhancing children's active learning capacity, alleviating short-term hunger, and providing an incentive for children to attend school regularly and punctually." Female learners who cannot manage their menstrual hygiene related similar concerns, including loss of pride and dignity, and were left feeling humiliated and powerless (Klasen, 2002).

1.4 Aim of study

The aim of the study was to investigate whether inadequate or no menstrual hygiene facilities at schools contributed to high levels of absenteeism amongst female learners in schools in the Ocean View area and greater Western Cape.

The main research questions that guided the study are presented below:

1.4.1 Main research questions

Primary research question:

1. Does poor menstrual hygiene lead to high levels of absenteeism and poor educational outcomes for females in the Western Cape?

Secondary research question:

1. What is the state of menstrual hygiene facilities in schools in Ocean View?
2. What are the views of female learners in relation to menstrual hygiene facilities at their schools?
3. What are the best practices pertaining to sanitation facilities and MHM?

1.4.2 Main Research Objectives

Arising from the research questions, the objectives of the study are discussed below:

Primary research objectives:

1. To establish the state of menstrual hygiene facilities at schools in Ocean View.
2. To solicit the views of female learners in relation to menstrual hygiene facilities at their schools in the Ocean View area.
3. To examine best practices pertaining to sanitation facilities and MHM.

1.5 Clarification of important concepts

This section discusses the key concepts and definitions that were pertinent to this study.

Absenteeism is “chronic absence (as from work or school). It is also “the rate of such absence” (Merriam-Webster, 2014).

Activism refers to the practice that emphasises action and support in an effort to provide reform and make a societal change (Goodwin and James, 2009).

Adolescence “begins with the onset of physiologically normal puberty and ends when an adult identity and behaviour are accepted. This period of development corresponds roughly to the period between the ages of 10 and 19 years, which is consistent with the World Health Organisation's definition of adolescence (Houppert, 2000).”

Aggregation refers to “the collecting of units or parts into a mass or whole” (Merriam-Webster, 2014).

Audit is defined as “a formal examination of an organisation's or individual's accounts or financial situation” (Merriam-Webster, 2014).

Collaboration means “to work jointly with others or together especially in a particular endeavour” (Merriam-Webster, 2014).

Contraception is “the use of medication for the deliberate prevention of conception or impregnation” (Merriam-Webster, 2014).

Dignity is “the quality or state of being worthy, honoured or esteemed” (Merriam-Webster, 2014).”

Education Management Information System (EMIS) refers to “a system for the collection, integration, processing, maintenance and dissemination of data and information to support decision-making, policy-analysis and formulation, planning, monitoring and management at all levels of an education system” (UNESCO, 2008:101).

Enrolment is “to insert, register, or enter in a list, catalogue, or roll i.e. the school *enrols* about 800 pupils” (Merriam-Webster, 2014).

Illiterate refers to “having little or no education, especially the inability to read or write” (Merriam-Webster, 2014).

Indigent is “suffering from extreme poverty” (Merriam-Webster, 2014).

Inequities are “instances of injustice or unfairness” (Merriam-Webster, 2014).

Institutionalised is “to make into an institution or give character of an institution”, and “to incorporate into a structured and often highly formalised system” (Merriam-Webster, 2014).

Intrinsic refers to “belonging to the essential nature or constitution of a thing” (Merriam-Webster, 2014).

Latrine is defined as “a receptacle (such as a pit in the earth) for use as a toilet” (Merriam-Webster, 2014).

Menstrual Hygiene Facilities refers to clean and private sanitation facilities that allow for adequate menstrual hygiene management (Kirk and Sommer, 2006).

Menstrual Hygiene Management “Menstrual Hygiene Management (MHM) is a term that has recently emerged among the International Development Community to explain the processes around the handling of menstruation” (United Nations International Children’s Emergency Fund [UNICEF], 2012).

Menstruation “is a normal biological process and a key sign of reproductive health, yet in many cultures it is treated as something negative, shameful or dirty” (Bharadwaj and Patkar, 2004).

Minor refers to a person who is “not of legal age” (Merriam-Webster, 2014).

Municipality is “a primarily urban political unit having corporate status and usually powers of self-government” (Merriam-Webster, 2014).

Post-colonial era is defined as “the historical period or state of affairs representing the aftermath of Western colonialism; the term can also be used to describe the concurrent project to reclaim and rethink the history and agency of people subordinated under various forms of imperialism” (Ivison, 2018).

Potable water refers to “water that is suitable for drinking” (Merriam-Webster, 2014).

Protocol is “a preliminary memorandum often formulated and signed by diplomatic negotiators as a basis for a final convention or treaty” (Merriam-Webster, 2014).

Puberty is “the condition of being or the period of becoming first capable of reproducing sexually that is brought on by the production of sex hormones and the maturing of the reproductive organs (such as the testes and ovaries), the development of secondary sex characteristics (such as male facial hair growth and female breast development), and in humans and the higher primates by the first occurrence of menstruation in the female” (Merriam-Webster, 2014).

Sanitary-dignity refers to appropriate measures for females to manage their menstrual-related matters in a dignified and private way (Department of Women in the Republic of South Africa, 2017).

Structural barriers in schools refer to “a barrier that exists in the context of schools that limits the meaningful involvement of a learner. This can be in the form of regulation and process that keeps students powerless throughout education, from their individual classrooms to highest political offices in the land” (Giroux, 1981).

Treaty is “a contract in writing between two or more political authorities (such as states or sovereigns) formally signed by representatives duly authorised and usually ratified by the law-making authority of the state” (Merriam-Webster, 2014).

1.6 Summary

This chapter sought to bring forth the nature of the study. Therefore, it describes how the research was conceptualised and conducted. The chapter discusses the research’s statement of the problem, problem context, rationale and significance, aims, objectives and research questions of the study. Also, Chapter One highlights that in South Africa there have been increasing calls for government to

focus on improving girls' education. Ensuring that female learners are provided a quality education is widely considered an unequivocal public good. Recent debates concerning educational opportunities for female learners have exposed that educational content, delivery and the environment continue to perpetuate and generate gender inequities and inequalities at schools in South Africa.

This chapter touches on the study's main assumption that female learners miss school or are usually absent due to poor menstrual hygiene. Indeed, this issue has come under the spotlight in South Africa after humanitarian efforts by some celebrities buying sanitary pads for female learners were reported by the media. There have been several campaigns launched by prominent South Africans to highlight the plight of female learners who are poor and cannot properly manage their menses every month whilst attending school.

After undertaking community work in the township of Ocean View Community, the researcher was prompted to embark upon this study after he had met several people who raised their concerns regarding this challenge. The members of the community also raised concerns with regards to the negative impact that inadequate menstrual hygiene facilities at schools posed for adolescent girls in Ocean View.

1.7 Structure of the report

This study attempted to address some of the gaps in theoretical knowledge and existing policies, especially social and educational policy, by investigating how menstruation and puberty-related challenges in the context of poor sanitation and menstrual hygiene facilities were helping to reproduce gender inequities and inequalities in the South African education system.

This thesis is presented in six chapters. Chapter 1 is the Introduction to the Research, and provides an overview to the study and the rationale for, as well as the reasoning behind, the study. Chapter 2 focuses on the Literature Review of the study. Here the thesis presents and reviews relevant literature pertaining to this study. Chapter 3 discusses the pre and post Democratic South Africa, and elaborates on the context that gave birth to the socio-political and economic issues that shaped, and continue to define, the living conditions of community members of Ocean View and South Africa in general. It pays particular attention to the roles of historical and contemporary forces in defining the socio-economic outcomes of South Africans. Chapter 4 is the Methodology section of the thesis. It highlights the various methods and tools that were used to select respondents, collect and analyse data, and the motivating factors behind the choice of each aspect. Chapter 5 is the Presentation and Discussion of Findings. It presents the findings of the study and the framework for a discussion and analysis of the

findings. Chapter 6 is the final chapter, and discusses the main conclusions of the study and provides recommendations from the respondents and researcher.

The next chapter is a discussion of the literature review that guided the research study.

2 Literature Review

2.1 Introduction

The purpose of this chapter is to discuss the literature review that guided this research study. In this undertaking, the researcher had examined various literature sources similar to the current study for comparison, to draw insights and lessons. The former First Lady and First Secretary of the United States of America, Hilary Clinton, once said: “There cannot be a true democracy unless women’s voices are heard. There cannot be a true democracy unless women are given the opportunity to take responsibility for their own lives” (About.com Women’s History, 2010). In the same vein, Africa cannot, and will not, be a true and free democratic continent unless women are able to fully engage, participate and have access to education and decision-making opportunities. Today, African societies are faced with redefining the role of women in the post-colonial era. Furthermore, increasing attempts are being made to create opportunities for women at school, home and in the workplace (Hall and Sambu, 2016).

Education has widely been seen as key to eliminating global inequalities that exist within modern democracies (Hall and Sambu, 2016). Despite initiatives being employed worldwide, substantial discrepancies still exist in societies with regard to the roles played by women and men. One of the Millennium Development Goals (MDGs) adopted by the United Nations in 2000 that was to be achieved by 2015 was “to promote gender equality and empower women”. In 2016 the MDGs were replaced by the Sustainable Development Goals (SDGs) where goal number 5 was to “achieve gender equality and empower all women and girls”. In recent years, endeavours to achieve a gender equitable society have been at the epicentre of social development approaches being driven by various countries (Janda, 2004).

Despite progress being made in achieving gender equity globally, it is female learners who remain the most discriminated against in accessing education, and within education systems. According to Alexander et al. (2014): “There are currently 57 million children worldwide, including 31 million girls who are out of school, and two thirds of illiterate adults are women.” In sub-Saharan Africa, adolescent girls are more likely to drop out of secondary school than their male counterparts. There are several reasons that hinder and prevent the girl child from attending school. Some of these reasons include structural barriers in the school environment, poverty, and discriminatory gender norms. Research into female learners’ absenteeism increasingly shows that their absence from school also has economic consequences. According to Brocklehurst (2004), research shows that “for every 10 per cent

increase in female literacy, a country's economy grows by 0.3 per cent." Furthermore, the more educated women are in society, the more likely they are to raise children that are healthy, well-nourished and educated in a way that young individuals will be able to develop the necessary skills needed to contribute to their societies (Alexander et al., 2014).

There remains limited information available in South Africa regarding absenteeism of girls (or boys) from school. In addition, it is not possible with the information available to conclude that female learners are missing substantial numbers of school days as a direct result of their periods. An article released by Africa Check (2016) responded to claims that as many as 7 million girls in South Africa were missing school every month as a consequence of their inability to manage their menses appropriately in the school environment, and found these claims to be false. However, there were approximately 2.6 million female learners aged 9 to 20 years who were attending school yet did not pay school fees, which may have put them at risk of being unable to afford to buy sanitary pads for their menstruation (Jeynes, 2016:1). Moreover, the silence on MHM, it strongly argued to contribute to a lack of access to facilities needed by female learners and is seen to reinforce gender gaps. Consequently, due to the perceived impurity women develop negative ideas associated with their periods- they can view themselves as dirty, and not able to discuss openly about their different circumstances in this area. (Allen et al., 2011).

The non-governmental organisation (NGO) Dignity Dreams works on the assumption that families that cannot afford school fees will be unable to afford sanitary pads. However this is an imperfect presumption. An audit of schools in the Eastern Cape by the NGO Equal Education found that some female learners opt to miss school during their periods because of poor hygiene facilities. Dr Adam Cooper of the South African Human Rights Commission suggests that this remains an important area for research, even though there have been exaggerated claims that are not based on any evidence (Jeynes, 2016:1).

Although there is insufficient data to directly confirm reasons for absenteeism, it is probable that female learners' dignity and suffering are impacted by poor menstrual hygiene and the related facilities. A failure of government to address this issue, in effect, is a failure of government to eliminate gender inequality in schools and ultimately in the wider spectrum of South African society. The completed study aimed to determine whether inadequate or no menstrual hygiene facilities at schools did, or did not, contribute to high levels of absenteeism and undue hardship amongst female learners in schools in the Western Cape. This study also determined that there were certain needs that had to be addressed in order for the girl child to have an equal opportunity with regard to achieving academic and educational success like her male counterparts (Nahar, 2006).

2.2 Law and Policy

In South Africa, the implementation of menstrual hygiene and sanitation-related legislation is incoherent and, for the most part, left up to individual municipalities without national enforcement or regulation. For this reason, despite making commendable inroads into eradicating the sanitation backlog, in 2010 the government acknowledged in its Millennium Development Goal's (MDGs) Country Report that its target of eliminating the full sanitation backlog by 2014 was "too ambitious" (Government of the Republic of South Africa, 2010).

More recently, there has been a spike in activism in the development community, including the celebration of the first official Menstrual Hygiene Day in 2014, emphasising the potential impact menstruation in poor income-settings may have on a female learner's rights to education. According to the United Nations International Children's Emergency Fund (UNICEF) (2012) "Menstrual Hygiene Management (MHM) is a term that has recently emerged among the International Development Community to explain the processes around the handling of menstruation."

Furthermore, when this process is deemed satisfactory or efficiently 'good', MHM is defined as one having access to the necessary resources (e.g. menstrual materials to absorb or collect menstrual blood effectively, soap and water); facilities (a private place to wash, change and dry re-usable menstrual materials in privacy during menstruation, and an adequate disposal system for menstrual resources, from collection point to final disposal point); and sufficient education about MHM for males and females (United Nations International Children's Emergency Fund, 2012).

This study assumed that inadequate MHM is a human rights issue and therefore, there was a need to investigate its impact on female learner's dignity and education. The research was positioned within the human rights framework because it is one of the few moral visions that has received wide acceptance internationally, meaning that it is an invaluable source of information about global priorities for development and social change (United Nations International Children's Emergency Fund, 2012).

2.2.1 South African laws pertaining to access to menstrual hygiene facilities in schools

In 1996, former President of South Africa, the late Nelson Mandela, stated that "as long as women are bound by poverty and as long as they are looked down upon, human rights will lack substance." Although South Africa has since made significant progress in respect of improving the plight of women, many challenges still exist (Department of Women in the Republic of South Africa, 2017).

In 2017, the Minister in the Presidency responsible for Women, Minister Susan Shabangu highlighted that the current health system of South Africa provides free access to contraceptives and health services for sexually transmitted diseases. She emphasised that what remains unseen "... is the provision of sanitary towels for the indigent girl child. For most indigent women, menstruation is often a rather inconvenient physiological reality against which there is no control, and which is expensive for most ordinary women to afford" (Department of Women in the Republic of South Africa, 2017). It is in this context that the Department of Women, as the guardian of the promotion and advancement of gender equality and the empowerment of women in South Africa, decided to develop a Policy Framework on Sanitary Dignity.

Furthermore, the Constitutional Court describes the right to dignity and the right to life as one of the most important human rights. The court expresses the view that the right to dignity is the acknowledgement of the intrinsic worth of a human being. To this degree, the South African Constitution (1996) highlights that "dignity is the source of a person's innate right to freedom and to physical integrity." In order to give effect to these constitutional principles, it is imperative upon government to advance and promote women's rights to dignity (Department of Women in the Republic of South Africa, 2017).

The former President of the Republic of South Africa, Jacob Zuma, in his State of the Nation Address of February 2011, stated the following: "Given our emphasis on women's health, we will broaden the scope of reproductive health rights and provide services related to, amongst others, contraception, sexually transmitted infections, teenage pregnancy and sanitary towels for the indigent" (Gontsana, 2015:1). However, as of yet this promise has failed to materialise, and failed to mention the need to address concerns pertaining to menstrual hygiene facilities in the school environment (Department of Women in the Republic of South Africa, 2017).

2.2.2 Mandate of the Department of Women in South Africa:

The mandate of the Department of Women in the Republic of South Africa (2018) is "to champion the advancement of women's socio-economic empowerment and the promotion of gender equality." This mandate is guided by the Constitution that guarantees equality, including gender equality. Section 9(2) of the Constitution "guarantees the full and equal enjoyment of all rights and freedom by people of all genders." Furthermore, it provides that legislative and other measures be designed to protect or advance persons or categories of persons disadvantaged by unfair discrimination, to promote the achievement of equality (Constitution of South Africa, 1996).

In order to advance the constitutional commitment to equality and address the sanitary-dignity of indigent persons, the Department of Women has “embarked on the process of developing an integrated policy on the provision of sanitary products to indigent persons, and to ensure that such persons are afforded the opportunity to manage menstruation in a knowledgeable, safe and dignified manner.” However, there is currently no national policy guiding the provision of adequate menstrual hygiene facilities for female learners in the school environment. Furthermore, current policy and frameworks pertaining to the provision of sanitary products and adequate menstrual hygiene facilities are inconsistent, uncoordinated and would seem to depend on provincial precedencies (Department of Women in the Republic of South Africa, 2017).

The lack of policy pertaining to the provision of sanitary products and adequate menstrual hygiene facilities for female learners may have implications relating to their education, health, empowerment, employment and social activities. The provision of all aspects regarding adequate MHM is not properly regulated or managed. (Department of Women in the Republic of South Africa, 2017).

The following are areas of concern:

- there are no national norms and standards;
- although some provinces provide sanitary products to some indigent persons, it would seem that this is not necessarily done in terms of approved policies, or to address inadequate menstrual hygiene facilities;
- the target beneficiaries differ from province to province – there is no clarity on who the beneficiaries should be and thus no consistency in this regard; and
- there is insufficient monitoring and evaluation (Department of Women, 2017:7).”

The latest Sanitary Dignity Policy Framework established by the Department of Women at the end of 2017, fails to address the full extent of the above-mentioned challenges. Thus, the ultimate objective of any framework pertaining to MHM ought to protect and, where necessary, restore the dignity of female learners (Department of Women in the Republic of South Africa, 2017).

2.2.3 Additional guiding legal and policy frameworks:

For the purposes of this study, the guiding legal and policy frameworks refer to various South African laws, South African court judgments, relevant policy documents and internal conventions and declarations.

Constitution of the Republic of South Africa, 1996

Section 1(a) of the Constitution states that one of the founding values of South Africa is human dignity, the achievement of equality, and the achievement of human rights and freedoms. Section 10 of the Constitution determines that everyone has inherent dignity and the right to have their dignity respected and protected. By implication, therefore, the Constitution requires that government put measures in place to further promote and protect the dignity of people. "Section 29 of the Constitution determines that everyone has the right to basic and further education. The importance of this right in the context of the completed study is clearly evident (Republic of South Africa, 1996)."

Most international efforts to address menstrual issues in low-income groups use the term menstrual hygiene management (MHM). In South Africa the term "sanitary dignity" is deemed more appropriate. Sanitary dignity refers to girls and women using a clean menstrual management product to absorb or collect blood, which product has to be changed in privacy as often as necessary for the duration of the menstruation period. The World Health Organisation-United Nations International Children's Emergency Fund (WHO/UNICEF) suggests that this should include access to soap, water and private facilities for washing and changing, as well as facilities for the disposal of used sanitary products (WHO/UNICEF, 2012).

In the absence of a national policy, South Africa's provinces determine how to implement a sanitary dignity programme, the provincial department through which the programme is to be coordinated and budgeted for, and the stakeholders involved. To address the challenges being experienced around sanitary dignity and the provision of sanitary products, including the apparent lack of sufficient and effective management and coordination of sanitary dignity programmes, it has become necessary for government to introduce specific measures and structures at national and provincial level. It is also necessary to make provision for structures that will accept responsibility for sanitary dignity at schools and other public institutions (Department of Women in the Republic of South Africa, 2017).

Early in 2018 President Cyril Ramaphosa instructed the Minister of Basic Education, Angie Motsheka to conduct a full-audit of school facilities with unsafe structures. This was a response to a fatal incident in which five-year-old Viwe Jali drowned in a pit toilet at her Eastern Cape school. Unfortunately, this was not the first of such incidents. In a news report released by the Mail and Guardian in 2018, the article highlighted research that was conducted by the Water Research Commission in 2014, in which a total of 130 schools in the Eastern Cape, Limpopo and KwaZulu-Natal were visited. The sanitation facilities in the various schools were scrutinised. Although conditions varied, the research showed how the dignity of pupils was being violated (Lekalakala, 2018:1).

Many of the toilet cubicles did not have doors that locked, 9% of the pit latrines did not have pit covers, and 18% of these were broken, allowing pests to infiltrate the space and spread contamination. Only

18% of the pupils consulted were of the opinion that the toilets were sufficiently private. Lekalakala (2018:1) observes: “One pupil expressed how the toilets had missing doors and another pointed out that they felt a loss of dignity. Of all the schools visited, only 35% had basins for handwashing; only 50% of these were functioning.” Thus, interventions should not just be about building safe structures but about building facilities that offer dignity to our children. The humiliating conditions discovered after the tragic death of Viwe Jali, exposing health and safety risks, are faced by children in the school environment of a free and democratic South Africa on a daily basis (Lekalakala, 2018:1).

Up till now, the study has shown that MHM, if and when it is discussed, is only mentioned in a limited way, through ambiguous allusions or brief references that fail to develop a cohesive approach. This is largely due to a combination of the taboo status of menstruation, in part a legacy of a patriarchal culture, the disempowerment of women living in poverty, and a failure on the part of the human rights system to hear their voices. It is symptomatic of the failure of gender mainstreaming within the human rights system to create a culture where barriers to women’s engagement are actively sought out and addressed. More work is needed to fully understand the taboo associated with menstruation, in order to effectively break the silence, and to advance work toward the realisation of women’s rights and an understanding of gender equality that enables women to succeed (Department of Women in the Republic of South Africa, 2017).

The next section discusses the respective theories that were pertinent to this study. These served as the theoretical lenses which the researcher used to analyse the issues which fell in the domain of the study.

2.3 Theories linked to the study

2.3.1 Amartya Sen’s Capability Theory

In more recent times, there has been a change in focus to produce inclusive education around the globe. Nevertheless, the shift towards inclusive education has been slower in the developing world than in developed nations. Polat (2011:51) argues that “inclusion is a philosophy based on values aiming to maximise the participation for all in society by minimising exclusionary and discriminatory practices that exist in societies.” In the light of this study, it was therefore important to define what is meant by inclusive education. Inclusion is such, regardless of one’s race, ethnicity, sexual orientation, language, social economic status and all those other aspects of an individual’s identity that may be perceived to be different (Booth, 2005).

The above-mentioned tenets are in line with Sen’s theory on human capabilities. According to Sen (1999), the capabilities approach is a “broad-based normative framework for the evaluation and

assessment of individuals' well-being, social arrangements, the design of policies and proposals about social change in society." This approach is used to measure various aspects of humans' well-being. Furthermore, a vital measure includes inequality and poverty measured against the average well-being of members' living within a particular society (Robeyns, 2005).

Amartya Sen's book *Development as Freedom* (1999) acknowledges that far too many people across the world have little access to healthcare, sanitary arrangements or clean water, and spend their lives fighting unnecessary morbidity, often succumbing to premature mortality. He further notes that the inequality that exists between women and men distresses the lives of millions of women, and, in different ways, severely restricts the 'substantive freedoms' that women enjoy (Sen, 1999). A major tenet underlying the theoretical underpinnings of this study is the view of how government agencies evaluate the concept of 'development'. In this regard, the researcher views 'development' as a process of expanding the real freedoms that people ought to enjoy. By focusing on human freedoms, this study contrasts with narrower views of development, such as identifying societal progress or development in terms of the growth of gross national product (GNP), or with the rise in personal incomes, or with industrialisation, or with technological advancement, or with social modernisation (Robeyns, 2005).

An increase in the GNP or of an individual's income can, of course, be very important means to expanding the freedoms enjoyed by the members of the society in question. However, this study highlights that freedom also depends on a wide variety of other determinants, such as social and economic arrangements (for example, facilities for education and healthcare) as well as political and civil rights (for example, the liberty to participate in public discussion and scrutiny). Furthermore, if freedom is what many theorists believe it is in terms of it being a requirement to development advances, then there is a major argument for concentrating on that overarching objective, rather than on some particular means, or some specially chosen list of instruments. This study further argues that 'development' ought to require the removal of major sources of 'unfreedom' such as poverty, tyranny, poor economic opportunities, systematic deprivation, neglect of public facilities and intolerance or over-activity of repressive states (Sen, 1999).

Despite the unprecedented increase in overall opulence throughout the world over time, Sen (1999) highlights that generally speaking the contemporary world still denies elementary freedoms to vast numbers of people across the world. This study argues that lack of substantive freedoms relates directly to economic poverty, which deprives people of the freedom to satisfy hunger, or to achieve sufficient nutrition, or to obtain remedies for treatable illness, or the opportunity to be adequately clothed or sheltered, or to enjoy clean water and adequate menstrual hygiene facilities at home or the school environment (Sen, 1999).

In many instances, the quality of infrastructure at schools has been confined and conceptualised in terms of 'school effectiveness'. Tao (2010:1) however notes that the 'effectiveness' paradigm has become very attractive to education planners and it has underpinned much of the research that has impacted policy to date. It straightforwardly shapes education as consisting of inputs, that when combined correctly, result in greater effectiveness. The limitation to this theoretical framework, however, is that it fails to account for insensitivities to culture, context, belief systems and particular structures that exist within schools – all of which affect how and whether inputs are actually used. Therefore, this study reiterates that the '*quality*' of a school should not solely be scored on inputs or the outcomes represented by tests scores, but rather on the processes that affect learners and their ability to learn (Robeyns, 2005).

2.3.2 Feminism as a theoretical perspective

Globally speaking, the Sustainable Development Goals (SDGs) recognise that access to water and basic sanitation services are basic human rights, and have thus set the attainment of 'universal' and 'equitable' access to water, sanitation and hygiene related services as a target to be attained by 2030. One of the assumptions of this study is that equitable and universal access to the basic human rights highlighted above cannot be attainable without specific gender equality measures in water, sanitation and hygiene policies to ensure that the rights of females to water and adequate sanitation are catered for (Waterlex, 2016).

The World Health Organisation and United Nations International Children's Emergency Fund (WHO/UNICEF) Joint Monitoring Programme for Water Supply and Sanitation of 2010, highlights that sanitation and hygiene issues, much like any other development issue, are highly gender-sensitive by nature. Access to adequate sanitation and hygiene is mediated not only by poverty and lack of infrastructure, but by power and inequality discrepancies experienced between men and women in society (WHO/UNICEF, 2010).

Women and girls are disproportionately affected by a lack of access to adequate sanitation and hygiene. The WHO/UNICEF (2010) Joint Monitoring Programme for Water Supply and Sanitation points out that gender-related power dynamics and discrimination motivate the multiple impacts of living without adequate water and sanitation, and females' ability to access basic sanitation and menstrual hygiene-related services. Menstruating schoolgirls face social stigma and negative cultural beliefs on menstruation and for such to be dealt with, both the girls and boys have to be educated about MHM. This could somewhat assist girls to feel more comfortable in managing their periods within the school environment. Therefore, attaining and sustaining universal and equitable access to water, sanitation and hygiene related services necessitates tackling not only issues of power, participation and inclusion

in the household and social gender relations, but also with regard to disability, age and other aspects of exclusion (WHO/UNICEF, 2010).

In instances where there is inadequate access to safe water and adequate sanitation-related services, people's living standards are benefited in various ways, namely: education, health, nutrition, reproductive health, privacy and dignity, economic opportunities, safety and security, and personal development. Therefore, improvements in such services can create significant changes in people's lives, which will be experienced differently by women and men because of their gendered roles, responsibilities and social status within the societies they live (Sommer et al., 2016).

One such specific water, sanitation and hygiene issue for women and girls is the safe and effective management of menstruation. Feminist theorists have highlighted the way in which menstruation is seen in a negative light, with not much research being conducted on the impact of the menstrual cycle on young women. Academic journals and popular magazines have continued to place emphasis on menstrual pathology, with articles and studies about angry, depressed and unreasonable women and girls (Houppert, 2000).

Feminist theories argue that society has been designed in such a way that it endorses patriarchy and neglects to address the needs, feelings, concerns and rights of women. A central theme surrounding feminist theories is highlighted by Irwin and Siddiqi et al. (2007), where they not only attempt to understand women's oppression in society but seek measures to bring about their emancipation. According to Irwin and Siddiqi et al. (2007) the emancipation of women will not be achieved without structural changes in society, especially with regard to women's increased participation in society. This can be achieved through improving access to all forms of educational training (Clegg, 2006:311).

Menstrual hygiene management (MHM) is a fundamental aspect of basic health for women and girls. Winkler and Roaf (2015) highlight that the lack of adequate facilities for the management of menstrual hygiene raises issues for an individual's right to privacy, human dignity and gender equality, and more broadly speaking, for non-discrimination and equality. While sanitation, menstrual hygiene and questions of sexual difference are gaining traction in the media, and are increasingly researched by academics, there remains a lack of robust data regarding the impact of poor sanitation on girls' schooling, and the economic aspects of constraining women's access to toilets (Sommer, 2009).

This study discovered that menstrual hygiene continues to receive limited attention in policies, research priorities, programmes, and resource allocation, and the information available to the public tends to be informed by anecdotal evidence. Furthermore, most sanitation and hygiene interventions in developing countries are failing to address all needs required for female learners to manage menstruation appropriately in the school environment. Sanitation facility design usually does not

address the specific needs of women and the girl child, and where hygiene promotion programmes do exist, many exclude the issue of menstrual hygiene, focusing instead largely on hand washing practices (Roose, et al., 2015).

Societal stigma and norms around menstruation, as well as male-dominated sanitation and hygiene decision-making have contributed to the neglect of social and physical needs of women and girls in relation to menstrual hygiene. Although it is an integral part of water, sanitation and hygiene initiatives, menstrual hygiene is still largely absent from social and economic policies in South Africa (Roose, et al., 2015).

Equivalence in numbers between men and women in leadership positions in society, although important, is not enough to address the gender question in any research field. It is, however, as highlighted by Cornwall (2007), far less clear what exactly the gender perspective should encompass in relation to developing countries dealing with issues relating to MHM in school. Furthermore, this study encompasses the use of gender as a tool for analysis and for transformation (promoting change beyond a coping level). This is far from the traditional 'add-women-and-stir perspective' (Harding 1995), which informed the 'Women in Development' (WID) approaches of the 1970s and 1980s (Boserup, 1970), and which, although heavily criticised, remain influential (Cornwall, 2007). Looking at sanitation through a gender lens brings aspects of the body back into the debate, and challenges more abstract, disembodied gender concepts. In this regard, not only will sanitation benefit from a gender analysis, but gender theory also stands much to gain by addressing questions of sanitation (Tilley, et al., 2013).

In light of these many challenges, the study explored initiatives that address some of these challenges at schools. The study recognises the need to go above and beyond the traditional issues of menstrual hygiene in schools, and to use the vehicle of education to challenge the negative attitudes and lack of awareness, thereby empowering women and girls (Kirk, 2015).

There is growing evidence that shows that water and sanitation initiatives are more likely to be successful when women take leading roles in the various stages of setting up, monitoring, evaluating and designing the processes required to ensure that operations remain sustainable. The effects of both improved service provision and better knowledge about hygiene and its related facilities are felt throughout the wider community, most obviously through improved general health and a better quality of life. Kirk (2015) highlights that there are additional impacts on women such as increased confidence and self-esteem. Beneficial impacts for women have a ripple-effect, positively influencing their families, communities and those who share the benefits from all these improvements (UNICEF, 2005).

In India, a water project called the Sustainable Health through Water and Sanitation Programme (2004) brought about substantial improvements in water supply and sanitation and other hygiene facilities. A crucial element of this project's success was due to the role played by a women's empowerment group. This women's group took it upon themselves to ensure that toilets and other hygiene facilities were constructed, and the project's successful completion took place (Water Partners International, 2005).

Sanitation programmes that have incorporated MHM, whilst ensuring that women and girls have equitable roles in decision-making, ownership and leadership throughout the programme cycle, have seen sustainable improvements in women and girls' access to adequate sanitation and hygiene-related services. Moreover, such programmes can have a far broader impact on gender equality beyond equitable access to sanitation and hygiene. For example, this can result in a reduction in the time women and girls spend on water, sanitation and hygiene-related work. It can also afford them more time to pursue economic, political and social activities, creating an enabling environment for women's economic empowerment, and social and political participation (Halcrow, et al., 2012).

Challenging underlying gender roles through water, sanitation and hygiene-related programmes, and supporting women's voices, leadership and employment within those programmes, can change the status of women and girls in the family and the community, and contribute to real progress towards gender equality. From a Rights Based approach inclusive education on MHM could assist in highlighting some tendencies, which temper with the dignity and worth of menstruating girls. It can also help to clear myths and misconceptions surrounding menstruation. For instance, some boys ridicule, make fun of, insult, bully, name-calling and shaming need to be understood and addressed. (Because some cultural beliefs-women are made to feel impure, restrictions are put on what they can or cannot do during this time- these put considerable constraints on the girl child and women in general (Sommer et al., 2016).

Addressing menstrual hygiene challenges for female learners in a strategic way requires more than building a toilet or drilling a well. This research study therefore had paid special attention to how social policy could tackle the issue in a more holistic way. In this regard, feminist theories are instructive as they challenge existing organisational structures, funding parameters and the attitudes of policy-makers. These theories remain critical in contexts where educators, health and sanitation experts are needed to provide the necessary support for the fulfilment of the girl child's basic human rights (Sommer et al., 2016).

The next section of this chapter looks at the themes that were linked to the study.

2.4 Themes linked to the study

During the time this study was conducted, there was limited data on the nature and content of the topic. The researcher therefore explored literature from similar studies completed in various developing countries to guide him in his investigation of menstrual hygiene facilities and equal educational opportunities for female learners in schools in the Ocean View area and greater Western Cape.

2.4.1 The state of menstrual hygiene facilities at South African schools

The provision of adequate and clean menstrual hygiene facilities at schools cannot be underestimated or ignored. In order for the South African Government to succeed in addressing the lack of basic sanitation and appropriate menstrual hygiene facilities at schools, and to achieve the necessary health standards required, the sanitation crisis in public schools must become a major focus of all spheres of government. Since female learners are increasingly struggling to fully participate at school when their menstrual needs are ignored, this remains a significant issue for policy to address.

For all females, menstruation is a natural and monthly reality. In South Africa at large, menstruation has continued to remain a taboo topic throughout many communities. This has an impact on the ability of communities to bring to the fore issues around menstrual hygiene programmes and facilities. However, there have been increasing calls for all spheres of government to implement appropriate menstrual hygiene-related interventions across both primary and secondary school levels (Sommer, 2010).

The high drop-out rate at secondary schools recently led to South Africa's main opposition political party, the Democratic Alliance (DA), calling for an investigation to provide the data and evidence to inform appropriate interventions. The lack of political impetus for a sanitation policy seldom receives a dedicated budget. The resulting adverse effect leads to a lack of funds for promoting appropriate sanitation and menstrual hygiene-related facilities at all government schools across the country. In many instances when adequate sanitation and menstrual hygiene facilities are in place, the budget and framework needed to maintain them have remained largely absent (Writer and Staff Writer, 2017).

It is widely understood that outside the family setting, schools are the most important places of learning for children. It is therefore important that schools are stimulating learning environments. According to Abrahams et al. (2006), the provision of clean and adequate menstrual hygiene facilities in schools enables an environment that can function as a safety net for female learners who have access to no other adequate facilities to manage their menses (such as at home or in their own

surroundings). Thus, the impact of the school environment should not be taken for granted, as schools are ultimately areas that can influence the greater community. (Abrahams, et al., 2006).

Abrahams et al. (2006:32) highlight that in South Africa, there is a lack of commitment to sanitation-related issues at provincial, regional and local spheres of government because there are too many other pressing issues to address, as well as the lack of capacity and skills to address the related issues. There remains an urgent need for MHM to become a greater focal point on the South African government's agenda. Such a framework or policy needs to be mainstreamed in the business plans and activities of provincial government departments, regional authorities and local authorities as social policy implementing agents (Abrahams et al., 2006).

It is undeniable that sanitation infrastructure at public schools vary substantially and continue to reflect historical resource allocation and distribution patterns, with the worst conditions affecting black learners, particularly in rural and township schools. Statistics released in 2014 by the Department of Education in South Africa showed that it was confronted with a disheartening picture with regard to the state of sanitation in the majority of South African schools. According to Gopal and Ngubeni (2016), statistics showed that of the 23 740 public schools in the country, 474 had no sanitation facilities, 4 681 were forced to make do with an unreliable water supply, and 604 had no water at all. A frightening 49 per cent either had no sanitation facilities or were forced to rely on pit latrines or a combination of pit latrines and other facilities. These statistics applied to almost half of all government schools in the country (Gopal and Ngubeni, 2016).

Currently South Africa has no appropriate school sanitation and menstrual hygiene framework or policy. At present, the various provincial governments determine how to implement interventions and programmes relating to MHM at schools. Decisions regarding which department is responsible for coordination and budgeting, and which are relevant stakeholders, are at the level of provincial government. The Sanitary Dignity Framework established by the Department of Women in 2017 highlighted that the National department sent requests to all provinces and relevant departments to determine what is in place and how each province and department is implementing Sanitary Dignity programmes across schools in the process of developing their framework (Department of Women, 2018:20).

The Sanitary Dignity Framework, compiled by the Department of Women in 2017, showed that every provincial government had established programmes to distribute sanitary resources at schools (such as pads, tampons, menstrual cups etc.). Although such programmes were beneficial to the female learners at the schools that were being assisted, they failed to address the related facilities pivotal for

female learners to make appropriate use of sanitary resources in a dignified environment (Department of Women, 2018).

Previous situations in South Africa showed that when faced with pressure from civil society, government was more inclined to exercise the necessary political will to execute and implement policies that strive to address the needs of people. A civil society movement called Equal Education (EE) has been campaigning since 2013 to ensure that all schools meet the standard for basic infrastructure set out in the regulations relating to Minimum Uniform Norms and Standards for School Infrastructure. The Infrastructure Norms and Standards require that schools that have no access to any form of water supply and sanitation must be prioritised and receive these services by the end of 2016. However, this is yet to be achieved (Gopal and Ngubeni, 2016).

It is imperative that the current Infrastructure Norms and Standards are supported and complemented by further legislation and policies aimed at promoting access to adequate menstrual hygiene facilities at schools. Although there remains limited literature on the conditions of menstrual hygiene facilities at schools in the Western Cape, similar studies completed in other areas provided useful insights to this study. A study by Bharadwaj and Patkar (2004:4) demonstrated that “poor sanitation is correlated with absenteeism and drop-out rates of girls in developing countries – efforts in school sanitation to address this issue to date have ignored menstrual hygiene in facility design and construction.” In addition, lack of privacy, the availability of water, and raising the awareness amongst boys and men were issues that still remain untouched by social policy interventions (Bharadwaj and Patkar, 2004).

Sommer (2010) notes that there is a general understanding in the modern world that menstruating adolescent female learners require female-appropriate sanitation facilities at school that should, for example, include objects for disposing sanitary pads and other sanitary objects. Furthermore, without the appropriate menstrual hygiene facilities, adolescent female learners may be unable to remain comfortable in class (Sommer, 2010).

There are reports highlighting how many schools in the developing world directly contribute to female learner’s ill health through the provision of appalling sanitary conditions. The Rural Water Supply and Sanitation Project of the World Bank aimed to improve female learners’ school attendance in Morocco, through reducing the traditional burden of them having to fetch water. The report compiled by the World Bank (2004) showed a 20 per cent increase in school attendance rates over a four-year period. The convenience of increased access to water and adequate sanitation facilities reduced the time previously spent around these tasks by 50-90 per cent (WaterAid Report, 2014).

In rural Pakistan, research by Van Wijk (2004) showed that more than 50 per cent of female learners drop-out of school as a consequence of their schools not having latrines. In many schools in South

Africa, there remains a massive shortage of potable water and sanitation facilities. Poor menstrual hygiene facilities make it exceptionally difficult for females to manage their periods whilst at school. Nahar (2006:3) adds that lack of water and sanitation facilities in certain schools in Pakistan led to increased pressure on existing facilities, leaving them in a state of disrepair for most of the time. Under such conditions, it was found that female learners were reluctant to make use of the existing facilities, especially during their menstrual cycle, and instead made use of their own (unhygienic) methods or simply opted to not attend school (Nahar, 2006).

Some of the research on the impact of inadequate or absent MHM on female learners' education has shown that female learners sometimes missed up to a week of school, or dropped out completely if there are no private toilet facilities and appropriate menstrual hygiene resources in their place of education. Another critical challenge associated with poor MHM and which is faced by female learners at school, was the fear of being teased by boys, the consequences of which impacted on their self-esteem and ability to concentrate. For example, physical and verbal bullying was one of the main grievances of female learners interviewed in Malawi (Pillitteri, 2011).

In Ethiopia, House et al. (2012) highlight that 50 per cent of female learners in one school missed between one and four days of school per month due to their inability to manage their menstrual cycle. In 2011, only 45 per cent of schools in developing and low-income countries had adequate sanitation facilities when measured by United Nations standards (UNICEF, 2012). Further, inadequate MHM caused adolescent female learners to miss as many as five days of school per month. Approximately 23 per cent of these learners ultimately dropped out of school, therefore impacting on female learners' opportunity for education, income generation and societal participation, all of which hampers one's self-worth and confidence (Gopal and Ngubeni, 2016).

More recently, Equal Education (EE) in the Western Cape conducted a social audit across 250 schools in the Western Cape which included an extensive sanitation survey. The results of the social audit and broader research provided useful insight into the extensive challenges faced by learners with limited access to water and adequate sanitation. Gopal and Ngubeni (2016:2) notes that "learners reported that, due to poor sanitation facilities (or complete lack thereof), they actively avoided going to the toilet, which is correlated with poor concentration in class and health problems." The report also found that high learner-to-toilet ratios in many schools resulted in diminished time for learning, as learners were forced to stand in long queues for toilets (Gopal and Ngubeni, 2016:2).

It was highlighted that in some instances, female learners were often left with no other choice but to leave school to find more acceptable menstrual hygiene facilities, and consequently leading to female learners missing out on learning. The report also indicated that a lack of toilet paper and soap in the

schools that had sanitation facilities were causing learners to contract illnesses from the toilets, also resulting in them losing time from school. Another point worth noting was the fact that female learners across many of the schools surveyed, mentioned that they did not have access to menstrual hygiene products and disposal facilities, resulting in them feeling ashamed to use the school facilities, and opting to miss school during their menstrual period (Gopal and Ngubeni, 2016: 2).

According to Nahar (2006:3), in developing countries “there is often no private spaces to change and clean their rags, and no safe water and soap to wash them properly.” In certain cultures, it is even more difficult for girls to manage their menses appropriately because of the attached culture of shame and embarrassment that leaves females with no other choice but to seek refuge in well-hidden places. These spaces are often wet, dirty and unhealthy. These practices have been found to lead to a significant portion of reported illnesses connected to female reproductive health, thus contributing to high levels of absenteeism at effected schools (Jordanova et al., 2015:6210).

On the contrary, in countries where government interventions have prioritised the provision of adequate menstrual hygiene facilities for women, the impact has only been positive. A study completed in Sri Lanka and Malaysia in 2004 found that reductions in mortality rates and communicable disease were linked strongly to improvements in sanitation and menstrual hygiene facilities. The success of these two nations’ respective governments focused on human development programmes that were based on an interconnected relationship between healthcare, education, and water and sanitation departments. Women’s involvement in these programmes also proved pivotal to the necessary gender equality needed. As a result, in some cases female life expectancy increased as much as 11 years (Liljestrand and Pathmanathan, 2004).

The South African government has openly admitted that its policy position remains weak with regards to addressing ‘Sanitary Dignity’ in the school environment. The numerous challenges associated with poor MHM may have far reaching implications. Furthermore, the need for and importance of a comprehensive policy framework to urgently tackle the dire state of school infrastructure (particularly pertaining to menstrual hygiene facilities) in thousands of South African schools could not be greater. After all, the right to basic education is a Constitutional imperative, and the right to adequate sanitation facilities is a component of this imperative (Gopal and Ngubeni, 2016).

2.4.2 Soliciting the views of female learners in relation to menstrual hygiene facilities at their schools

A qualitative study gives a more nuanced understanding of the cultural significance of menstruation. It is helpful to ascertain female learners’ attitudes and experiences of issues closely linked to puberty, and how the latter are changing over time with the impact of modernising influences. For instance,

the World Bank (2005) reported that a case study conducted on female learners in Mumbai revealed that while poor sanitation facilities contributed to creating unfriendly school environments for all learners, they were particularly so for menstruating girls.

Female learners have stated that even if they were able to buy commercially-produced sanitary pads or make adequate pads from rags or other materials, the lack of clean and private sanitation facilities that allowed for adequate MHM discouraged female learners from attending school during menstruation. Moreover, due to the perceived impurity, women and female learners alike may develop negative ideas associated with their periods- they can view themselves as dirty, and not able to discuss openly about their different circumstances in this area (World Bank, 2005).

In instances where there is lack of, or inappropriate, menstrual hygiene facilities at schools, female learners have been found to be less likely to participate as frequently as their male counterparts in extra-curricular activities. Jacqueline et al. (2012) provided useful insight into the completion of her investigation concerning various gender dynamics, mainly focusing on the value of extra-curricular activities. The results of the surveys collected in her study showed that approximately 76 per cent of male learners participated in extra-curricular activities, compared with 48 per cent female learners. When female learners were asked why they preferred to not participate, the vast majority of them indicated that the sanitation facilities provided at the school had some part to play (Abrahams et al., 2006).

Interviews that were conducted with female learners in South Sudan showed that many of the female learners' discomfort was augmented by the presence of male teachers and students. Adolescent female learners mentioned that in some instances, male teachers did not completely understand why they had an urgent need to go to the bathrooms, and, at times, insisted that female learners should wait until the end of class. Furthermore, on the topic of menstrual hygiene facilities, research completed by Janda (2014) highlights that the female learners explained that they had to ensure that they were very clean before they got back to school, otherwise boys teased them publicly, bullied them and uttered nasty things about them. This power relation between boys and girls at schools has become increasingly difficult to tackle and poses a major challenge to eradicating gender disparities and injustices in the school environment (Janda, 2004).

A study completed in rural Kenya provided reflections on –MHM among school girls. According to Sommer (2010) female learners reported that it was difficult to manage their menses whilst at school due to a lack of water and an inability to bathe. One learner said that when she had issues related to managing her menses whilst at school, she would go home to address the issue and would not return to school thereafter. This student mentioned that many hygiene issues, especially those related to

menstrual hygiene, were difficult to address at school because it always involved running the risk of being seen by others, which at times, led to shame. She found it difficult at her school as there were no dry and private places to lay sanitary napkins or cloths if need be, and there were no essential resources such as basin or soap available in the female sanitation facilities (Sommer, 2010).

In a research study Khumalo and Miji (2014) analysis's the perceptions of the impact of poor infrastructure on learning and teaching in rural South African schools, participants were asked whether, apart from the facilities they mentioned in earlier questions, which other facilities were lacking in their school. From their answers, a single theme emerged: it related to a lack of adequate sanitation. The learners all indicated that like classrooms, there was severe a shortage of sanitation facilities in the school. Participants at one school highlighted that there were few toilets available and a complete lack of privacy, and many of the existing facilities did not have access to running water. The participants, many of whom were female learners, highlighted that they could not trust how healthy their school environment was because they did not have access to running water, making it impossible to meet basic sanitary requirements needed to create an environment for adequate teaching and learning at their school (Khumalo and Mji, 2014).

Another study indicated that girls showed a positive attitude towards the use of proactive menstrual hygiene initiatives, such as menstruation cups. As discussed by Oster and Thornton (2009:13) "a study completed in Nepal shows that 61 per cent of the girls reported that they used the menstruation cup." However, the data available had no direct indications as to whether there were necessarily changes in female learners' schooling behaviour, but evidence did suggest that benefits were related to increased convenience of menstrual blood management and increased mobility while participating in school activities. The convenience of the menstruation cup has served to remove many of the challenges faced by schools that lacked adequate sanitation facilities (Oster and Thornton, 2009).

The responses to questionnaires and surveys completed in various studies that focused on the provision of water and sanitation facilities for menstrual management in the school environment proved useful. Insights obtained in the previous studies which were conducted in developing countries, in particular, added value, as they shared similarities with this study. Gopal and Ngubeni (2016) reports that the sentiment solicited by the majority of female learners throughout the literature examined was the feeling of discomfort in the school environment during menses due to inadequacies in the assurance of privacy, disposal of materials for menstruation or sufficient school water and sanitation facilities. These issues are urgent because the dignity, security and education of South African children are being placed at risk. These cases continue to highlight the threat that poor sanitation infrastructure at schools poses to all learners, particularly female learners (Gopal and Ngubeni, 2016).

2.4.3 Best practices pertaining to sanitation facilities and menstrual hygiene management

United Nations Educational, Scientific and Cultural Organization (UNESCO) (2000) highlights that although significant efforts to increase school enrolment and retention rates have been largely successful, the number of learners with dismal access to water supply, adequate sanitation facilities and other forms of appropriate hygiene has also grown. Although the study points out that many countries in the developing world are struggling to address problems pertaining to menstrual hygiene facilities, it also pays special attention to some of the best practices being implemented across the world to assist in helping address inadequate water supply, sanitation and hygiene in resource-scarce school settings in South Africa (WHO, 2009).

The Gender and Development Network (2016:8) emphasises that building the capacity of all water, sanitation and hygiene actors, both governmental and non-governmental, on issues related to gender equality is critical to ensuring that all the social dimensions of MHM and the related needs of female learners are understood within the context of equal rights to water, sanitation and hygiene. There is a growing body of evidence from academic research and data collected by practitioners and experts that indicates that ineffective MHM at schools has a detrimental effect on the capacity of female learners to benefit from advances in the educational opportunities presented to them (Water Supply and Sanitation Collaborative Council, 2013:5).

Further research across the globe has documented the various ways in which countries were able to improve MHM for female learners in developing countries. Sommer (2010:268) recommends that adding MHM to the agenda concerning access to water and improved sanitation in schools has major benefits for countries over the short- and long-term. One review completed by Kuhlmann (2017:373) found that the availability of adequate water and sanitation facilities in schools is a key determinant of female learners' school attendance in general. A lack of appropriate facilities and increases the challenges female learners face with regard to managing their menses (Jasper et al., 2012).

In the context of widespread negative cultural and religious beliefs and practices about menstruation, Kuhlmann (2017:374) recommends improving the decision-making process for female enrolment, and extending intervention efforts beyond female relatives only, to include all those involved in the decision-making process. This ought to include, the attitudes of male teachers-with whom female learners is entrusted to during school days. This is also critical in ensuring a holistic approach to MHM in the school environment. Consequently, research conducted on MHM is increasingly highlighting the importance of involving males in the understanding of menstruation, showing how issues pertaining to MHM are more likely to emerge as key considerations among educators and policy-makers in

improving not only school attendance but also the availability of suitable water and sanitation facilities at schools in poor resource settings (Oster and Thornton, 2011).

More research in the area of MHM with regard to sanitation facility design needs to become a priority among education policymakers. Although significant research has been conducted around water and sanitation in schools in developing countries, much of this is disconnected from existing literature on MHM at schools. If research seeks to address these gaps, there is a greater likelihood that issues surrounding menstrual hygiene and sanitation infrastructure design are likely to be addressed (Kuhlmann, 2017: 374).

Jasper et al. (2017:373) points out that “significant barriers or hurdles to improved MHM at schools include: a lack of awareness and support from staff members at their schools, many of whom are male; lack of support from family members; limited economic resources to purchase the necessary resources for one to manage menstruation-related issues; and poor conditions related to water and sanitation facilities at schools with concurrent concerns about washing, privacy and disposal of used menstrual hygiene resources (Kuhlmann, 2017).”

It remains imperative that there are adequate toilets as highlighted by Gender and Development Network (2016:9). Adequate toilets/latrines will ensure privacy and safety and minimise embarrassment and loss to dignity – all of which can have a positive impact on a female learner’s ability to make the most of her educational opportunities. Such facilities ought to include the necessary resources required for female learners to easily wash their bodies and clean their sanitary resources, as well as ensuring that facilities are equipped with mechanisms for disposing of used sanitary resources if they cannot be reused, such as bins with lids that are safely managed. Such practices can only be catered for when MHM is incorporated into the educational system (Smart Development Works, 2014).

2.4.3.1 The need for policy direction

In order for attention to menstrual hygiene to be addressed in a way that is effective and sustainable, it cannot be a mere afterthought or an add-on. Menstrual hygiene management needs to be an integral part of wider efforts to promote girls’ education. This implies that MHM needs to be an essential component of the dialogue that takes place between policy makers, practitioners and communities about girls’ education, as well as health related issues pertaining to female learners (Smart Development Works, 2014).

From a policy perspective, there are various approaches that one can choose in order to address a societal issue. In order to address issues related to inadequate sanitation facilities and MHM at schools, WHO (2009:7) suggests that “positive policies are required at all levels of government –

national, provincial, local and at school level – to encourage and facilitate the achievement of appropriate levels of water, sanitation and hygiene in schools. In addition, a supportive national policy framework is needed that promotes role-players at provincial level and in school spheres to develop the appropriate governance and management preparations in order to plan, fund, implement and coordinate improvements (WHO, 2009).

2.4.3.2 National Level

When co-ordinating national policy to address inadequate sanitation facilities and the related concerns pertaining to MHM (WHO, 2009:7) the stakeholders involved ought to ensure that there is a policy framework that promotes improved infrastructure (sanitation) in schools. Once the framework is established, it is imperative that the relevant national bodies or departments are established for setting and monitoring the standards decided upon. Stakeholders should review the national standards agreed upon and, in an iterative process, make the necessary adjustments (WHO, 2009).

This requires that there is an effective regulatory framework in place that enforces compliance to these standards. In order to ensure sustainability of the implemented national policies in this regard, it would require national authorities to invest and provide the necessary expertise and resources for continuous assessment and planning. Furthermore, stakeholders at a national level are also required to promote, provide and/or facilitate funding for national programmes to address inadequate sanitation facilities and the related concerns pertaining to MHM (WHO, 2009).

Stakeholders at a national level must ensure that developments are monitored in order to endorse consistency with regard to the application of standards across all districts (or provinces in the case of South Africa). Another requirement of national role-players as highlighted by WHO (2009:8) is to “ensure that water, sanitation and hygiene components are adequately reflected in the Education Management Information System (EMIS) at national level.” An important task for national decision-makers is ensuring the appropriate curriculum for teacher training. This requires supportive training and information resources appropriate to a wide variety of school settings (WHO, 2009).

2.4.3.3 District or Provincial Level

District or provincial authorities also have an important role to play with regard to ensuring that policy addresses inadequate sanitation facilities and the related concerns pertaining to MHM. It is highlighted as important by WHO (2009:9) for provincial and district authorities to “raise awareness of water, sanitation and hygiene in schools among all the key stakeholders at provincial level of government.” Furthermore, efforts need to go into ensuring that the relevant government department or service provider exists at the respective level of government that provides the necessary oversight to ensure compliance with the standards agreed upon. Any successful

implementation of policy also involves all entities, organisations and other relevant civil society groups working in the province or district on water, sanitation and hygiene in schools (WHO, 2009).

It is therefore important that provincial or district authorities need to provide the necessary expertise and resources for continuous assessment and planning, but unlike national authorities, this must happen with reference to the local areas that fall within the related district or province. WHO (2009:9) notes that provincial authorities provide locally appropriate plans and specialist input for new structures and improvements to existing sanitation infrastructure at schools. This must be supported by the necessary budget allocation for planned improvements and new developments. Provincial authorities are required to ensure oversight of the related improvements and developments to ensure the consistent application of the appropriate standards agreed upon in all schools at a local level. Thereafter, these stakeholders must monitor ongoing conditions in all schools and endorse remedial actions when necessary (WHO, 2009:9).

2.4.3.4 Local Levels (School and community)

There are essential steps that must be taken at local level to ensure that any policy pertaining to managing water, sanitation and hygiene standards in schools achieves its intended outcomes. At a local level, it is imperative that all local and school authorities make a concerted effort to “mobilise support from teachers, schoolchildren, families and local stakeholders to buy into the policy adopted in order to achieve and sustain a healthy school environment” (WHO, 2009:9).

It is vital that key stakeholders at local level establish an appropriate body or relevant department to oversee the implementation of the standards in the school. WHO (2009:9) emphasises that local authorities must “define a set of targets, policies and procedures for implementing national standards and/or guidelines in a way that reflects the respective local conditions.” Thereafter, local stakeholders need to explicitly define how targets, policies and procedures will be applied (WHO, 2009).

Local authorities should be required to constantly assess the existing conditions across schools and consult other local stakeholders (including staff and the respective local community) to plan the necessary improvements and developments. Local authorities are required to consult with various specialists for their input with regard to plans around the developments and improvements that need to be made. Unlike provincial or district authorities who must promote the allocation of funds for new developments and improvements, local authorities are required to guarantee the funding that is needed for the respective planned improvements and new developments (WHO, 2009:9).

2.5 Summary

This chapter provides an overview of how women and girls are disproportionately affected by a lack of access to adequate sanitation and hygiene in the school setting, and the effect that this has on female learners making the most of the educational opportunities presented to them whilst at school. Furthermore, research surrounding menstrual hygiene has recently emerged as a domain for interventions designed to maintain adolescent girls' school attendance with the ultimate goal of reducing drop-out rates and supporting them throughout secondary school. Arguably, the education opportunities of many young females in South Africa have been compromised due to their inability to manage their menses whilst at school. In South Africa, and many other sub-Saharan African countries, there is a persistent gender gap in education that social policy can help to address.

This study argues that inadequate MHM is a human rights issue because of its impact on female learner's right to education. Its discussions are positioned within the human rights framework which is a moral vision that has received wide acceptance internationally and is an invaluable source of information about global priorities for development and social change (United Nations International Children's Emergency Fund, 2012).

Researchers are finding that the absence or lack of toilets or separate sanitation facilities in schools for female learners is a contributing factor to their lack of dignity and may result in absenteeism. Sommer (2010) notes that there is a general understanding in the modern world that adolescent female learners attending school during menstruation require female-appropriate sanitation facilities that should, for example, include objects for disposing sanitary pads and other sanitary objects. Furthermore, without the appropriate menstrual hygiene facilities available, adolescent female learners may be unable to remain comfortable in class as a consequence (Sommer, 2010).

The South African government has openly admitted that its policy position remains weak with regards to addressing 'Sanitary Dignity' in the school environment. There remain numerous challenges associated with poor MHM with far reaching implications. Thus, the importance of a comprehensive policy framework to urgently tackle the dire state of school infrastructure (especially pertaining to menstrual hygiene facilities) in thousands of South African schools could not be greater. The right to basic education is a constitutional imperative, and the right to adequate sanitation facilities is a component of this imperative (Gopal and Ngubeni, 2016).

In order to address issues related to inadequate sanitation facilities and MHM at schools, WHO (2009:7) suggests that "positive policies are required at all levels of government – national, provincial, local and school – to encourage and facilitate the achievement of appropriate levels of water,

sanitation and hygiene in schools.” In addition, a supportive national policy framework that promotes role-players is needed at provincial level and in school spheres to develop the appropriate governance and management preparations in order to plan, fund, implement and coordinate improvements (WHO, 2009).

Therefore, it is imperative that the current Infrastructure Norms and Standards of the country are supported and complemented by further legislation and policies aimed at promoting access to adequate menstrual hygiene facilities at schools. Although there remains limited literature on the conditions of menstrual hygiene facilities at schools in the Western Cape, similar studies completed in other areas provided some useful insights to this study.

The next chapter contextualises menstrual hygiene and female learners’ absenteeism in the country’s socio-economic and historical forces.

3 The Context: The role of historical and contemporary forces in shaping human development outcomes

3.1 Introduction

Menstrual hygiene and the inability of South African female learners to go to school when they are undergoing their periods is not just a sanitation issue or a physiological one. Rather, it is something that has wider socio-economic implications, as well as historical connotations given where this country has come from. Although 1994 marked the year of democratisation that granted each South African with a wide array of political freedoms, social justice for the vast majority of female learners remains a challenge, as the post-democratic government is failing to address the inadequate, and often complete lack of, menstrual hygiene facilities that were prevalent during the previous colonial and apartheid system. In order to give explanation to the above mentioned sentiments, this chapter contextualises menstrual hygiene and female learners' absenteeism within the country's socio-economic and historical background.

Nnadozie (2013:82) notes that "South Africa's history is characterised by a struggle for supremacy between the migrant Europeans and native black Africans, with the minority rule of the former culminating in 1948 in the introduction of the Apartheid policy." The apartheid system is largely defined as a system of separate development that made a concerted effort to ensure that all people of colour in South Africa were marginalised from the vast majority of national life. Furthermore, under the Apartheid regime various laws and regulations limited people of colour's movement, political participation, land ownership access to equal education and other crucial basic services, such as the appropriate facilities needed for female learners of colour to manage their menses in a dignified manner whilst attending school (Nnadozie, 2013).

The end of Apartheid in 1994 marked an end to an era of oppressive racial policy, and ushered in the first democratic elections in South African history. That these elections were the first to include all races was seen as a significant turning point in the socio-economic and political landscape of the country. Nnadozie (2013:82) observes that the general perception among the majority of South Africans was that 'the ANC comrades' would design policies with the intent of addressing the injustices and inequalities of the past." Moreover, there was an urgent need to alleviate the high levels of poverty that were being experienced in both rural and urban settings. In the education sector the

additional problems needing to be addressed included the inequalities in access to resources, infrastructure and social services, especially among people of colour in South Africa (Nnadozie, 2013).

Since becoming a democracy, the South African government has failed to include any provisions to appropriately address challenges related to MHM in schools in any of its policies. Instead, government has geared policy towards poverty alleviation, improving Gross Domestic Product (GDP), eliminating unemployment and reducing its fiscal debt. Although the post-democratic government focuses on pro-poor policies, it has paid little attention to addressing issues related to the impact of MHM on the educational opportunities of female learners. This, despite the right to education being explicitly highlighted in South Africa's Constitution that was introduced in the year 1996 (Hopkins, 2001).

As a consequence of historical forces and socio-economic difficulties, the goal of achieving social justice in South Africa has yet to be achieved. Although South Africa's Constitution enjoys high acclaim internationally as one of the most progressive in the world, and provides a framework with the potential to change the lives of female learners across South Africa, this is only likely to happen when efforts to enforce the Constitution include the participation of all spheres of society (Andrews, 2017:2).

3.2 Pre-democratic South Africa: The promotion of separate development

During the apartheid era, discrimination on the basis of race dominated all spheres of social and public life. Liebenberg (2000) highlights that the vast majority of public facilities, including bathrooms, schools, benches, post-offices, elevators, restaurants, train carriages and other forms of public services were racially segregated. Furthermore, the quality of services provided to people of different races were highly unequal. Such services included the menstrual hygiene facilities that were provided for female learners of other race groups (Liebenberg, 2000).

Throughout the apartheid period, inequality in the form of service delivery was explicit in terms of government spending. The poorest 40 per cent of South African households (which at the time equated to half of the total population) received only 11 per cent of the total amount of government expenditure, while the wealthiest 10 per cent of households (which equated to 7 per cent of the total population at the time) received over 40 per cent of total government expenditure. This uneven net spend on different racial groups contributed to enormous differences in the livelihoods of the people of South Africa (Liebenberg, 2000).

The policy of separate development adopted by the Nationalist government created independent homelands for different tribal groups in South Africa. The idea of creating homelands provided the justification for the apartheid government depriving many black Africans formal citizenship and basic

human rights. This was achieved by the apartheid government splitting the country's main land into fourteen administrative entities, also known as homelands or Bantustans. These entities were dominated by fragmented governance, inefficiencies and corruption as a means to maintain white minority rule. As a consequence, the availability of adequate menstrual hygiene facilities in African schools were non-existent, and had several negative implications for female learners who were of colour (Liebenberg, 2000:2).

It was black people who ultimately bore the brunt of state failures during the apartheid regime, as this racial group was denied equitable access to essential social services, resources and economic and educational opportunities. Black African communities and schools were deliberately underdeveloped and lacked adequate sanitation, water and refuse removal services as well as adequate housing, schools and clinics, so depriving millions of individuals of their dignity and opportunities to live a life worth valuing (Dugard, 1978).

3.2.1 Bantu Education

During the apartheid years of the Bantu education system, there was no formal sanitation framework that guided policy or made provision for matters relating to water and sanitation at schools or across black communities in general. A formal framework that addressed the lack of adequate water supply and sanitation infrastructure needed to become a top priority for the new post-apartheid government to ensure that a life of human dignity was not only experienced by white South Africans but all race groups (Chrisitie and Collins, 1982).

Historically, only middle- and high-income white South Africans, who resided in municipalities and towns, were granted the formal right to education and the delivery of sufficient water sanitation facilities. In stark contrast, the water and sanitation facilities in black townships and Bantu schools were dismal. Government authorities only granted waterborne sanitation to very few people of colour. Furthermore, the vast majority of black communities in urban areas were subjected to finding alternative means to managing their sanitation-related concerns. Black urban communities had to use the 'bucket-system', where buckets were often shared between many households and emptied two or three times a week, while little to no sanitation provision was available to those black people who resided in rural areas. Black communities in particular were neglected – adequate electricity and water supply were broken down or non-existent; living conditions were poor; roads, sanitation and health facilities were 'primitive'; and recreational services were few and far between (Fiske and Ladd, 2005:2).

The lack of water and sanitation policies for black Africans during this period had grave consequences for female learners. It can be inferred anecdotally that female African learners had no proper MHM during Apartheid and this issue was not even something worth considering by the apartheid regime. Under Apartheid, white female learners enjoyed not only a superior educational system but were granted the necessary sanitation facilities that female learners require to manage their menses appropriately. Consequently, white female learners stood a far greater chance at making the most of the educational opportunities presented to them whilst at school (Hopkins, 2001).

Racial segregation was maintained at all levels of the educational system and could be explicitly seen in the availability of sanitation facilities being provided to learners. Unlike the sanitation facilities provided to white learners during Apartheid, Bantu schools had no essential resources such as running water, basins or soap, nor were regulations to ensure such facilities allowed for the dignity of the black girl child. In addition, there was no funding set aside for the construction and/or maintenance of menstrual hygiene facilities, therefore leaving black female learners in serious discomfort during time of menstruation. The lack of such resources and facilities further impeded the ability of black female learners to make the most of their educational opportunities when in the school environment (Dugard, 1978).

Racial segregation was maintained at all levels of the educational system. According to Dugard (1978:84), “there were enormous disparities in per capita expenditure on the education of ‘black’ and ‘white’ children: in 1974-1975, the estimated per capita expenditure on African children in primary and secondary schools was R39, compared with the estimated amount of R605 spent on each white child. This discrepancy in the amount of money spent on white and black children exacerbated the differences in the quality of sanitation and menstrual hygiene services being provided to children of different races at schools. The higher net spend on white female learners meant that there were more funds available for the provision and maintenance of sanitation facilities for white female learners, which was not the case for female learners of colour (Dugard, 1978:84).

Inequality in the education system was exacerbated by black learners having to bear the burden of financing their own reading materials, stationery and extra lessons, a problem not experienced by their white counterparts. Not only did this ensure that the poorest sections of South African society were to remain poor, but also that any additional finances held by the state could be (re)directed to the white minority. Moreover, this prevented the black population from investing in their own appropriate water and sanitation facilities at Bantu schools, as financial resources were already limited (Dugard, 1978).

3.3 Tracing water and sanitation issues in the new democratic dispensation

The democratically elected African National Congress (ANC) government of 1994 took office with a mandate to repeal former policies of racial inequality that were deeply entrenched in all spheres of South African life. One significant challenge facing the newly elected government was that all geographical areas were marked by great disparities in wealth and services. Hopkins (2001) notes that white areas, characterised by their plush opulence, were in stark contrast to impoverished areas designated for people of colour. Furthermore, the year 1994 was significant as the ANC had the immediate task of drafting and adopting new policies that were transformative in the delivery of basic services, including those pertaining to water and sanitation.

According to the National Department of Human Settlements (2012), “in 1994 an estimated figure of 15.2 million people had no access to basic water supply (at least 25 litres of safe water within 200 meters of one’s home) and an estimated 20.5 million people in South Africa lacked basic sanitation.” This was at a time when the total population was slightly over 40 million people. Therefore, given this history, the post-Apartheid government was faced with the massive responsibility of tackling the lack of dignity that the apartheid legacy bestowed upon black South Africans, including those related to ensuring the sanitary dignity of the African girl child (Hopkins, 2001).

In terms of the provision of adequate sanitation facilities in public schooling, the Reconstruction and Development Programme (RDP), which was a South African socio-economic policy framework implemented by the ANC government of Nelson Mandela in 1994, devoted an entire chapter to education. Reites (2009:10) highlights that the RDP proposed 10 years of government-funded compulsory basic education. Furthermore, the programme emphasised the importance of existing and new schools building educational facilities that met all the needs of respective learners. However, like several other contemporary South African policies, the RDP failed to explicitly highlight the importance of addressing concerns related to MHM at schools. Consequently, the related issues failed to be taken into consideration in the design of educational facilities that were supposedly built with the purpose of meeting the needs of all learners. This ultimately impeded the educational opportunities presented to female learners in contrast to their male counterparts. (Reites, 2009).

The School Register of Needs of Schools indicated that in 1996, there were significant sanitation infrastructural backlogs. The Department of Water Affairs (2010) indicates that “35 per cent were without potable water; and 12 per cent did not have access to toilets – pit latrines constituted 47 per cent of all school toilets.” In recognition of the apartheid legacy of inadequate access to water and sanitation facilities for particular groupings of people, post-apartheid legal and policy documents created a framework for the equitable provision of basic sanitation to all South Africans. These

frameworks adopted a human rights approach to access to sanitation, establishing various state obligations in respect of the provision of basic sanitation to poor communities and schools (Global and Ngubeni, 2016). However, any pursuit to improve the state of menstrual hygiene facilities in South African schools continued to suffer with the introduction of a macro-economic policy of the South Africa government known as the Growth, Employment and Redistribution (GEAR) strategy, which was introduced in 1996 (Reites, 2009).

The White Paper on Basic Household Sanitation of 2001 was established to provide legislative support for the constitutional obligations of government to ensure that all South Africans had access to potable water and adequate sanitation. The National Sanitation Strategy in 2003 set a target to provide all South Africans with clean potable water and adequate sanitation within five to seven years. This originally committed the government to eradicate the sanitation backlogs and provide all citizens with clean and adequate sanitation facilities by 2010. In 2019, this remains a challenge to be attended to (Department of Water Affairs, 2012).

Financing the disparities in skewed educational facilities was a key concern on the post-1994 agenda to transform educational injustices of the past. The equitable share funding model adopted under the new government granted provincial legislatures the freedom to allocate funds amongst their respective provincial departments. The equitable share formula imposed was equated by accounting the size of the rural population in each province and the size of the population for social security grants, weighed by a poverty index (Fiske and Ladd, 2005). The main objective of using such a formula was to ensure that every province, whatever its financial standing, would be granted a fair opportunity to spend an equitable amount on each learner in their respective provinces (Fiske and Ladd, 2005).

A major challenge surrounding the equitable share model was that this funding mechanism failed to address the lack of, and/or inappropriate, menstrual hygiene facilities in many South African schools. It would seem reasonable to believe that enormous disparities in the availability of appropriate menstrual hygiene facilities amongst schools in different provinces would continue to persist because of historical patterns of racial and economic development in South Africa. Furthermore, some provinces had far greater capacity to spend budgets and address issues pertaining to MHM at schools than others.

Fiske and Ladd (2005:2) highlight: “wealthy provinces such as Western Cape in South Africa, which includes the City of Cape Town, and Gauteng, which includes the City of Johannesburg, would have been able to spend more than provinces such as Eastern Cape and Limpopo, both of which were formed in part from the impoverished rural homelands for black South Africans.” Although the revenue raised by national government was placed into one giant pot before being distributed

amongst all nine provinces in a race-blind and equalising manner based on demographic factors, including number of pupils, inequalities in the state of menstrual hygiene facilities amongst schools in South Africa continued to persist (Fiske and Ladd, 2005).

In order for provincial governments to be eligible for funding, and as part of the co-operative arrangement established between national government and provincial governments, strict orders were given to provincial governments to ensure that all schools met particular minimum standards which were consistent with section 5A of the South African Schools Act, which empowered the National Minister of Basic Education to promulgate minimum norms and standards for school infrastructure in particular. According to Fiske and Ladd (2005) “the minimum standards ought to encompass both infrastructure (i.e. classrooms and water and sanitation facilities) and an appropriate institutional environment.” The introduction of these standards was partially aimed to address the historical infrastructural backlogs that include mud hut schools and schools with inadequate sanitation facilities (Fiske and Ladd, 2005).

The original draft on the Infrastructural Norms and Standards issued in the early 1990s by the Department of Basic Education, while welcomed, remained largely inadequate. The department failed to ensure that they included explicitly stated plans around MHM at South African schools, nor how they would ensure that the relevant governmental and non-governmental bodies would be held accountable to the establishment and maintenance of the related services. By not doing so, previous challenges pertaining to MHM in pre-democratic South Africa continued to persist in the new democratic deposition. Furthermore, many educational opportunities for female learners from previously disadvantaged areas remained limited as a consequence of female learner’s inability to manage their menses in a dignified manner (Fiske and Ladd, 2005).

South African literature and policy around expanding educational opportunities for learners’ remains focused on learner performance and learner outcomes, often overlooking a more holistic and inclusive focus on the range of factors that contribute to poor academic performance and poor educational outcomes. It is clear that if South Africa wishes to address the problem that many learners are failing to complete their schooling, much needs to be done to address problems in the schooling system, within communities, families and individual learners (Hartnack, 2017).

3.4 Social justice and the challenges in funding equal educational opportunities

The South African Schools Act, Act 84 of 1996, section 3 (1) (1996) states “that all children in South Africa must attend school from the first school day of the year, in which such learner reaches the age of seven years, until the last day of the year, in which such learner reaches the age of fifteen years or

the ninth grade, whichever comes first.” South Africa experiences a very high participation rate (over 95 per cent) within the compulsory years of schooling, that is, Grades 1-9. Harnack (2017:1) indicates that the national school attendance rates have improved by 3 percentage points since 2012. These figures, however, serve as a smoke screen to hide the major problem of drop-out among older female learners (Hall, 2015).

This research study assumes that a significant barrier to advancing social justice in South Africa is the state’s failure to provide not only a coherent framework but adequate funding for concerns related to MHM at schools. If this challenge fails to be addressed, any intervention geared towards promoting social justice and development in and through education will not necessarily ensure that both female and male learners are granted equal opportunities to succeed in the schooling environment.

Absolute and relative poverty have played a role in school dropout in South Africa – examples being the inability to afford uniforms, transport and stationery, even in cases where learners’ school fees are covered by the state. However, absolute poverty on its own does not necessarily explain why learners leave school early. Dieltiens and Meny-Gibert (2009: 49) note: “while absolute poverty may account well for why poor learners commence school late and repeat grades, ‘relative poverty’ – and how children experience poverty in their daily lives – offers a much more convincing explanation for why learners leave school prematurely, as inequalities between learners (make them) more vulnerable to drop out.” For example, in poorer households or families, female learners may be forced into a situation in which they are routinely absent from, or even drop out of, school as they are unable to access sanitary resources during their menstrual cycle. This is a common problem throughout the African continent (Hartnack, 2017).

A problem with financing issues pertaining to MHM at school through equity is that means-tested targeted interventions in the education sector are not adequately funded. In light of the existing needs in post-1994, the state’s equity interventions require a greater commitment of political will and financial resources if they are to eradicate the social injustices that come about from failing to provide adequate MHM for female learners in schools (Janda, 2004). A lack of sufficient funding for access to menstrual hygiene products and related facilities is a major challenge facing female learners in South Africa, and forms an important aspect of water, sanitation and hygiene that is often overlooked. Consequently, the lack of access to adequate menstrual hygiene resources can mean that female learners have considerable difficulty in going about their lives during menstruation, and can be almost entirely restricted to the home, both due to practical reasons and stigma. Multiple studies have found that girls in low-income settings miss or struggle at school during menstruation if it is not possible for them to effectively manage their menstrual hygiene related concerns (Boosey et al., 2014).

Two key barriers to access to equal educational opportunities for female learners is that facilities where menstrual hygiene products can be changed privately, hygienically and with dignity are frequently not provided in schools, and often teachers do not grant female learners permission to use them. The most common menstrual hygiene products currently available are disposable sanitary pads, reusable pads and the menstrual cup. However, the high cost of menstrual hygiene products often means that these are inaccessible to female learners in resource-poor settings. It can also be challenging to ensure a consistent supply of sanitary products in rural areas, particularly those affected by conflict or where the areas is isolated geographically (House et al., 2012).

The provision of adequate MHM at schools in South Africa is not only a matter of comfort and dignity, but also a health issue. Studies have shown a link between poor sanitary health, cervical cancer and other reproductive health challenges. The shame associated around females regarding the management and discussions endangers the notion of womanhood and such shame is carried to the next generation; such silence creates a void where everyone remains with unanswered question and negative self-image (bodies endangered). In such a scenario it is hard to know some of the habits that might increase the likelihood of developing cervical cancer later on in life. Allowing girls and boys to discuss this topic without feeling self-conscious and shameful is key. Women who apply unhygienic practices are also vulnerable to infertility. The use of old clothes and rags for managing one's menses increases the susceptibility to urinary tract infections (UTI) and the Human papillomavirus (HPV) which causes cervical cancer. Furthermore, cervical cancer is the most prevalent cancer in women in developing countries, and is the cancer that causes the highest mortality among South African women. Given the far-reaching implications of poor menstrual hygiene, there is reason to believe that it is not merely one or two female learners who miss out on school due to no menstrual hygiene resources and facilities available but many others across South Africa (Sibanda, 2015).

Good management of menstrual hygiene should obviously include safe and sanitary disposal. In South Africa, this is widely lacking. In many instances, female learners and women have insufficient and inadequate facilities to dispose of their used sanitary products and cloths. In practice, this means the nearest open defecation field, river or garbage dump is the only available option. This applies to both commercial and homemade sanitary materials (Yakuotiyage, 2016).

In South African communities which frequently have poor waste management infrastructure, this type of waste will certainly produce greater problems. For this reason, encouraging appropriate MHM in schools across the country must be accompanied with calculated waste management strategies (TEN, 2007). Neglecting menstrual hygiene in schools could also have a negative effect on sustainability, as failing to provide disposal facilities for used sanitary materials can result in latrines becoming blocked

and pits filling rapidly, leading to situations where the sanitation facilities available are no longer able to be used (HOUSE et al. 2012).

On a global level, conversations around menstruation and access to adequate feminine hygiene are increasingly on the agenda. Although former President Jacob Zuma stated in his 2011 State of the Nation Address: “Given our emphasis on women’s health, we will broaden the scope of reproductive health rights and provide services related to, amongst others, contraception, sexually transmitted infections, teenage pregnancy and sanitary towels for the indigent” (Department of Women, 2017:5), it was only in 2012/2013 that issues related to MHM became more prominent in public discourse which informs public policy (House et al., 2012).

Further, it was only from 2017 that the South African national government took proactive steps to address the sanitation crises being experienced at schools by developing a draft of the Sanitary Dignity Policy Framework, in response to the national discourse around access to adequate sanitary products for females in the school setting (Department of Women in the Republic of South Africa, 2017). In order to advance the constitutional commitment to equality and address the sanitary dignity of indigent persons, it became necessary for the Department of Women to make provisions for effective and appropriate measures. The reality in South Africa is that, as reported in 2015, over 75 per cent of learners in the country are from families of low socio-economic status and attend schools which offer poor sanitation-related services, poor quality education and thus perform poorly (Spaull, 2015:37). Furthermore, it is these learners attending such schools who are at the highest risk of dropping out of school (Department of Women in the Republic of South Africa, 2017).

According to Spaull (2015: 34) “most school dropouts in South Africa occur in Grades 10 and 11, resulting in 50 per cent of learners in any one cohort dropping out before reaching Grade 12.” When one takes into consideration the National Senior Certificate (NSC) graduation rates, the situation is even more worrying. In 2013, only 40 per cent of those learners who started school 12 years earlier passed Grade 12, while the following year, this figure fell by a further 4 per cent to 36 per cent. The figures effectively indicate that approximately 60 per cent of South African learners are dropping out of the schooling system with no qualification (Spaull, 2015:36). In the context of this study, it is important to highlight that in South Africa there is insufficient research and data to indicate whether these high dropout rates, particularly amongst female learners, are a result of a lack of access to sanitary dignity products, and inadequate menstrual hygiene facilities being provided for female learners to manage their menses during menstruation (Spaull, 2015).

3.5 Summary

This chapter argued that social justice for the vast majority of female learners of colour is still a challenge in a post-apartheid era with the democratic government grappling to provide adequate menstrual hygiene facilities. In most cases the country still has menstrual hygiene facilities that were prevalent during the previous colonial and apartheid system. In some cases there are no facilities at all.

Unlike the sanitation facilities provided to white learners during the Apartheid era, Bantu schools, which were dedicated to African learners, had no essential resources such as running water, basins or soap, nor regulations to ensure such facilities allowed for the dignity of the black girl child. In addition, no funding was set aside for the construction and/or maintenance of menstrual hygiene facilities, therefore leaving black female learners in serious discomfort during time of menstruation, and thus impeding on the female learners' abilities to make the most of their educational opportunities (Dugard, 1978).

Any pursuit to improve the state of menstrual hygiene facilities in South African schools continued to suffer by the end of both the RDP and the introduction the basic macro-economic policy of the South African government known as the Growth, Employment and Redistribution (GEAR) Strategy, which was introduced in 1996. The White Paper on Basic Household Sanitation of 2001 was later established to provide legislative support for the obligations that government had a constitutional responsibility to ensure that all South Africans are guaranteed access to potable water and adequate sanitation. However, the establishment of this legal document still failed to address the sanitation backlogs that persisted since the apartheid era, let alone concerns pertaining to adequate menstrual hygiene facilities at schools. The original draft of the Infrastructural Norms and Standards issued in the early 1990s by the Department of Basic Education, while welcomed, remained largely inadequate. The norms and standards developed by the Department failed to explicitly state plans around MHM at South African schools. By not doing so, previous challenges pertaining to MHM in pre-democratic South Africa continued to not be addressed in the new democratic deposition.

This chapter further argued that a significant barrier to advancing social justice in South Africa was the state's failure to provide not only a coherent framework but adequate funding for concerns related to MHM at schools. Due to MHM being overlooked by government in terms of water, sanitation and infrastructure design, the state of the related facilities at schools in poor communities in particular have remained largely unaddressed. Lack of access to adequate menstrual hygiene resources can often mean that female learners have considerable difficulty going about their lives during menstruation, and can be almost entirely restricted to the home, both due to practical reasons and

stigma. However, although this point has been highlighted in this study, this chapter reiterates that insufficient research has been completed to prove that females' inability to manage their menses whilst at schools contributes to higher levels of absenteeism.

This chapter also touched on the fact that to date there remains no policy guiding the provision of adequate menstrual hygiene facilities to female learners in need, although sanitary concerns have been raised in national discourses. The provision of adequate sanitation facilities at schools has remained inconsistent, and uncoordinated, and would seem to depend on provincial priorities.

4 Methodology

4.1 Introduction

The purpose of this chapter is to describe the methodology that was followed by this study. This description of the methodology details the following: the process followed to collect the data for this study; the research techniques that were applied by the study; the process of analysis; and the methods applied. The ethical considerations and limitations that were encountered during the data collection period are also discussed.

4.2 Research Design

de Vos (2002) describes research design as a logical strategy for gathering data about the knowledge that is desired. The study that was conducted made use of a qualitative research approach. The use of this approach aims to understand society and the meaning people attach to life at a holistic level. Furthermore, this approach is well-known for its ability to document participants' accounts of meaning, perceptions and experiences. However, this approach does come with its limitations, such as the length of time it takes to collect and analyse the data. The collection of data involved spending many physical hours out in the field interviewing all the female learners who were sampled and transcribing the interviews thereafter, and this was expensive for the researcher (travelling costs and days taken off work) (Greeff, 2005).

4.3 Population and Sampling

Babbie (2013:134) describes a population as “the theoretically specified aggregation of the elements in a study.” In other words, population refers to individuals who contain certain characteristics for which the study is assessing (Strydom and Venter, 2002). The term population then, sets boundaries from which the participants can be drawn. In this study, the boundary was limited to schools in the Cape Town Metropolitan area with special focus on an area known as Ocean View. According to the national census completed in 2011 by Statistics South Africa (StatsSA), “the estimated population recorded was close to 30 000.” In the completed study, the sample population drawn was restricted to only female learners attending schools in the Ocean View area (Strydom and Venter, 2002).

The study sample of 19 female learners was drawn from three different schools in the Ocean View area. In the area, there are two primary schools and one high school. Their respective names are

Kleinberg Primary School, Marine Primary School and Ocean View High School. All of the 19 learners who were identified and participated in the study were between the ages of 12 and 17 years old. In order to understand the sampling technique that was adopted, the study provides a definition of non-probability and purposive sampling.

The researcher selected Ocean View area because it was an area he previously worked as a change-agent sensitising young females about sustainable practices around the appropriate management of menstruation. Furthermore, the social-economic conditions and the demographic in the selected area, is representative of the vast majority of people staying Cape Town Metropolitan and the greater Western Cape. In hindsight, the researcher thus believed that the research findings could be applicable to the vast majority of other areas in the Western Cape. The vast amount of the female participants that formed the sample, were learners who the researcher previously worked with. This was critical to the female learners feeling comfortable sharing their lived experiences pertaining to the perceptions they had of the state of the menstrual hygiene facilities at their respective schools and therefore helped in providing quality feedback during the interview process.

Babbie and Mouton (2001:166) argue that social research conducted in a particular situation where one has not got the power to make use of the kinds of probability samples used in large-scale social surveys is, in essence, a non-probability sample. Purposive or judgemental sampling is a method used in non-probability samples. The use of such a method suggests that there are times where a researcher may select a sample on the basis of their own knowledge of the population that they are working with (Babbie and Mouton, 2001; Strydom and Venter, 2002).

This study implemented a non-probability sampling technique. This technique was adopted because the researcher targeted a particular group in such a way that the researcher was not always seeking a generalisation of findings to the overall population (Somekh and Lewin, 2005). This kind of a technique is mostly applied in small-scale research, particularly when costs need to be minimised, and in qualitative approaches such as ethnography, case studies or action research (Denzin and Lincoln, 1994). Kitzinger et al. (1999) contend that this technique is appropriate where the researcher can easily access the sample, such as employees in a local company or a group of people. In this case, due to time and costs constraints, this approach was appropriate for the purposes of the study.

The 'snowball-sampling' technique was applied in combination with the purposive sampling technique. In this technique, a small number of individuals were identified to represent a population with particular characteristics. In this study, the individuals selected were female learners between the ages of 12-18 who were attending schools in the Ocean View area. They were subsequently used as informants to recommend similar individuals (Somekh and Lewin, 2005). This technique was

considered appropriate for the study as it gathered the views of female learners on the basis of some shared experiences, particularly those related to the state of the menstrual hygiene facilities at the schools in the area. Furthermore, the approaches adopted proved useful for identifying the 19 female learners for the individual interview discussions.

4.4 Data Collection

Given that the researcher's sample was derived from female learners between the ages 12 and 17 years old who attended schools in the Ocean View area, all of them were minors. Therefore, all participants and their parents were required to have read and then signed the written consent form before they were deemed eligible to participate in the study. The study made use of face-to-face interviews. Babbie and Mouton (2001:249) highlight that face-to-face interviews are mainly used in South Africa due to relatively low-levels of literacy. This data-collection process allowed the researcher to ask the questions verbally, and to record and transcribe the respondents' answers. The face-to-face interviews enabled the interviewer to engage with the female learners as well as observe their behaviour as they answered questions and participated in discussions (Babbie, 2013). This study completed 19 interviews, each lasting a duration of 10 – 20 minutes.

The interviewer ensured that the female learners did not misunderstand any of the questions by using simple language and observing the responses of the learners and rephrasing if it seemed appropriate. In doing so, the researcher was probably able to receive a higher and more accurate response rate than if the interview was conducted telephonically, via mail or using an emailed questionnaire.

4.4.1 Data Collection Instruments

The data-collecting instruments that were used for the study started with a semi-structured interview schedule. According to Harrel and Bradley (2009) "A semi-structured interview is a qualitative inquiry that combines a pre-determined set of open questions (questions that prompt discussion) with the opportunity for the interviewer to explore particular themes or responses further." In the conducted study, the responses from the semi-structured interview schedule produced responses that provided useful recommendations to educators and social policy makers.

After the semi-structured interview, a schedule was created before the researcher then entered the Ocean View area to complete the interviews with the female learners. The structured interview schedule was well thought through, refined and then agreed upon by the supervisor and a group of social workers in the Ocean View area. It was agreed that it was necessary to complete a pilot study to ensure that the researcher was completely prepared before entering the field to record and collect

data. The pilot interview was conducted prior to running the 'real' interviews with the female learners. The purpose for running the pilot was to detect the kind of interaction required and the dynamics of discussion that would likely exist among the male researcher and the female participants (Kim, 2010).

Pilot studies can provide unique opportunities to improve the skills of a qualitative researcher in conducting semi-structured interviews, including dealing with participants, selecting an appropriate venue for interview, conducting an in-depth interview, and seizing opportunities for probing emerging topics in the interview process. In addition to providing a ground for self-assessment of the researcher's preparation and capacity, the pilot study assisted the researcher in practicing qualitative inquiry and, as a consequence, enhanced the credibility of the qualitative research study that was completed. The pilot study also presented opportunities for the researcher to update and refine the interview schedule (Kim, 2010).

According to Polit and Beck (2006: 65) a "pilot or preliminary study is referred to as a small-scale of a complete survey or a pretext for a particular research instrument such as a questionnaire or interview guide." General application of pilot studies can be summarised in four areas: 1) to find problems and barriers related to participants' recruitment; 2) being engaged in research as a qualitative researcher; 3) assessing the acceptability of observation or interview protocol; and 4) to determine epistemology and methodology of research (Kim, 2010).

4.4.2 Data Recording

The researcher made use of a recording device to record the interviews after all the participants had given their consent to have the interviews recorded. The use of the recorder ensured accuracy with regard to all the findings in the study that was conducted. All the recordings were later transcribed in order to effectively capture the details of how the respondents answered all the relevant questions that were posed by the researcher.

4.5 Data Analysis

Tesch (1990:113) defines data analysis as "a process which entails an effort to formally identify themes and to construct hypotheses (ideas) as they are suggested by data and an attempt to demonstrate support for those themes and hypotheses." The researcher solicited the views of the female learners in order to investigate the role played by inadequate or no menstrual hygiene facilities in relation to high levels of absenteeism amongst female learners at schools in the Ocean View area and greater Western Cape.

The researcher followed the structure for analysis that Tesch (as cited in O'Brien, 2014) describes in the following steps:

1. "Read through all of the interview transcriptions;
2. Selected one interview and gained an understanding of the responses in relation to the study objectives;
3. Made notes in the margin next to the text that explained, described or raised questions;
4. Used a colour coding system to label and link similar notes;
5. Repeated this process with all of the transcriptions and re-evaluated the labels as the process continued;
6. Grouped labels into themes, categories and sub-categories, having kept the objectives of the study in mind;
7. Used the schema created (with labels, themes and categories) to create a framework for analysis;
8. The findings from the interviews were then written up in relation to the framework;
9. In the discussion actual quotes were used to link themes and;
10. The data were linked with findings from the literature review."

This method of data analysis is a well-documented approach to data analysis in qualitative studies. Tesch's (1990) "model ultimately enabled the researcher to prepare, interpret and capture the data." This method was appropriate for the study as it is a qualitative method that allowed for the themes and categories to be linked across the different interviews that were conducted in the study.

4.6 Data Verification

Data verification is the process of confirming that the data collected is valid. Babbie and Mouton (2001) explain that a key criterion of a good qualitative study is the trustworthiness of the study. There are four components that make up a 'trustworthy' study: credibility; transferability; dependability; and confirmability (Babbie and Mouton, 2001). According to Shenton (2014:64), "ensuring credibility is one of the most important factors in establishing trustworthiness." In order to support credibility in a study, triangulation should be taken into account. This means that a study should deliberately make use of different methods to ensure that various points of view of the individuals involved can be accounted for against one another and, ultimately, a valuable picture of the attitudes, needs or behaviour of the participants may be constructed based on contributions of a range of people. In addition, people should at all times be encouraged to be honest from the outset in order to ensure that credibility is maintained throughout the entire study (Shenton, 2014).

Transferability is centred on ensuring that the results at hand can be applied to the rest of the population. Thus, the study provided detailed descriptions of all the phenomena that were under investigation, allowing any reader to properly understand the investigation that was completed and to compare the phenomenon being described in the report with another report of a similar nature. (Shenton, 2014:69).

Shenton (2014) argues that in order to address issues of dependability, one needs to apply techniques to illustrate that, if the work were repeated in the same or similar context, similar results would appear. The conducted study ensured that the report was described in detail, thereby enabling future researchers to repeat the work, if not necessarily to gain the same results (Shenton, 2014).

The concept of confirmability is centred to the researcher's comparable concern to objectivity. An important aspect in the study that helped ensure confirmability throughout its course was that the researcher constantly admitted his predispositions. To this end, all beliefs that underpinned the decisions that were made, and the methods adopted, were acknowledged within the report (Shenton, 2014).

4.7 Main Ethical Considerations

This section of the study considered the main ethical issues that related to the completed study. Babbie and Mouton (2001:520) emphasise that a researcher involved with any type of inquiry has the right to search for the absolute truth, but that one's inquiry should never be at the expense of the rights of other individuals in society. There is a growing understanding that undertaking qualitative research can pose many difficulties for researchers. In certain instances, the data-collection process can be challenging, especially in cases where the study under investigation involves physical or emotional concerns, such as an illness or other stressful human experiences. Furthermore, the stories that the researcher obtains in interviews can be stories of intense suffering, social injustices, or other topics that may shock the researcher (Morse and Field, 1995).

The main ethical issue in this study was that the researcher was investigating a topic that was personal, sensitive and that was treated by some as a cultural taboo. The research was sex-specific, and many females find the topic uncomfortable to discuss. The study involved the researcher asking teenage female learners from the Ocean View area to express in detail their experiences of menstrual hygiene facilities at their schools. The intimate nature of the study meant that it involved so much more than participants simply signing a form to say that they were willing to offer information – they instead were allowing the researcher a window into their lives (Liamputtong and Ezzy, 2005).

Since the selected population consisted of females who were under the age of 18 (minors) and learners, the researcher first sought and gained the permission from both the parents and teachers of the learners. This form of informed consent was deemed necessary for the participation of the female learners who were minors. The study therefore applied the assumption that children that were under the age of 18 were not fully competent to give informed consent. The main purpose for parental consent in the conducted study related to the parents' right to have a say in what happens to their children. This relates partly to the parents' responsibilities for minor children (Moscow and Richards, 1996).

Furthermore, an important aspect of this study included the necessary engagement to gain the trust and confidence of adults, such as parents, guardians, teachers and social workers, who had responsibilities of caring for the female learners who participated in this study. Butler and Williamson (1994) have described how in sensitive research, these adult gatekeepers can present barriers with regard to access to completing studies involving children. The difficulties associated with gaining access to the female learners, in turn, shaped the design of much of the completed research. For example, in this instance, the researcher turned his attention to study children in schools as this presented an easier opportunity than gaining access to children in their homes (Butler and Williamson, 1994).

The researcher also took into account those children who wanted to take part in the research but were prevented by their adult gatekeepers because of the perceived adverse effects it would have had on them. Taking into consideration the power dynamics that exist between many parents and their children, the researcher understood that many of the female learners would be prevented from participating in the study as a consequence of adult concern. However, the researcher ensured that as many female learners as possible were included in the process by providing them an opportunity to be heard and being kept informed on the outcomes of the research, even though they were not necessarily interviewed (Walls et al., 2010).

This study anticipated and had to overcome major hurdles such as safety, cultural sensitivities and gender barriers (given the fact that the researcher was a male) in order to be able to conduct quality research. The success of this study was largely dependent on the co-operation and collaboration of the adults who could facilitate access to the research subjects. These were primarily the female social workers, teachers and the parents of the female learners in the Ocean View area. Therefore, a strategic approach was used in order to establish all the necessary collaborative relationships that were needed for the research to be completed. From the onset, the researcher sought opportunities for dialogue with the female social workers in the Ocean View area, both individually and in groups.

Establishing a good relationship with the female social workers in the first stage enabled the necessary collaboration thereafter (Thomas and O’Kane, 1998).

Before the study was undertaken and later completed, the researcher had already been working in the Ocean View area, sensitising the community on the need for young female learners to have access to proper sanitary hygiene in the community. The researcher had previously worked as a community change agent and had been involved in mobilising and educating young females at a community level. Having been a community change agent in the Ocean View area helped the researcher establish a working relationship with the social workers in the area, most of whom were females. These were the same social workers who then helped the researcher with the interviews that were completed with the female learners. In order to ensure that the female learners felt safe and comfortable, a female social worker was requested to sit in on all the interviews that were conducted by the researcher.

The female social worker ultimately played the role of liaison between the interviewer/researcher on the one hand and the teachers, guardians/parents and the female learners on the other. Each female learner was briefed by a female social worker before participating in the interview. The female social worker outlined what the interview would entail and the reason behind the research that was being completed. The female social worker provided the female learner with a general idea of the type of questions that would be asked and ensured that the female learners were completely comfortable with answering questions of this nature, before they went into the interview. These discussions took place in a private environment where the female learners felt safe to discuss their feelings and concerns, and where a female social worker was always present (Doloriet and Sambrook, 2009).

The method adopted by the researcher included providing all the female learners in the study with an information pack that was prepared beforehand. The information pack included a leaflet that described the research in an accessible way, together with activity sheets. This was all filed in a sealed envelope. In addition, all of the documents mentioned were accompanied by information leaflets for the learners, guardians and the female social workers. The leaflets described the tasks that were later completed in full. The social workers explained to the female learners and their parents that by agreeing to participate in the study, the female learners would be willingly providing insight into their views and experiences about the menstrual hygiene facilities at their school. Furthermore, it was made clear that there were no right or wrong answers to the questions. In relation to confidentiality, it was noted clearly in the leaflet, as well as verbally communicated to the respondents, that all responses would remain confidential to the researcher and the social worker. The importance of confidentiality was held in the highest regard throughout the study. The identities of the female learners were immediately discarded once the study was concluded (Hopkins and Bell, 2008).

All the concerns raised about issues related to a learner participating in the study, or the social workers, or the researcher, were resolved in a discussion either in person or telephonically with the parents who requested information at the time (Schmied and Wilkes, 2011). The second principle that was used with regard to the female learners' participation in the study, was that the female learners had the freedom to withdraw from the interview process at any point. Furthermore, ensuring child protection was a crucial element in this study. The help of professionals, which in this study included the female social workers from the Ocean View area, ensured that all the research was completed within a child protection model (Moscow and Richards, 1996).

Dickson-Swift et al. (2008) argue "that the carrying out of a formal risk assessment, which considers the physical and emotional risks associated with undertaking research of this nature, must be a part of the preparation for every study." The researcher also acknowledged the ethical responsibility that he had to the academic community. The study not only analysed but reported its successes, technical shortcomings and failures. The study maintained objectivity and integrity in the conduct of scientific research (Fahie, 2014). Moreover, the researcher remained aware that the ethical considerations were ongoing, and that ethical dilemmas could arise at any particular stage of the study and not just at the point of contact with the participants. Furthermore, the researcher knew that it would be naïve to assume that even though the study was passed by UCT's ethics committee, it would not necessarily be *de facto* an ethical piece of research.

4.8 Reflexivity

According to Archer (2007), reflexivity "is the idea that a person's thoughts and ideas tend to be inherently biased in other words, the values and thoughts of a person are represented in their work." Furthermore, Possick (2009) adds that reflexivity must be structured, systematic, and critical, and should account for the asymmetrical power relations – both positive and negative – which always exist within the relationship between the researcher and the participants involved. As a researcher delving into a topic that is widely considered taboo in the South African society, the researcher initially felt anxious with regard to the process.

The researcher was concerned about how the data-collection process would unfold, as the researcher had never conducted such a detailed study before. At first, the researcher was concerned about the time-frame related to completing the study, as he worked a full-time job whilst completing the study. However, to combat his feelings of anxiety and concerns about the study, the researcher ensured he had ongoing communication with support groups, such as peers and mentors, which kept him on track over the two-year period.

In order to assist the researcher emotionally, he made use of skilled professionals, such as a life coach, who provided him with regular and systematic debriefs about his mental and emotional state throughout the two-year period. This proved useful over the period of the researcher's study, as it provided the researcher with the opportunity for self-reflection and emotional stability. All these measures mentioned served to reduce the sense of vulnerability and isolation that the researcher felt at times during the period of study. Although some concerns and problems could not have been anticipated, the researcher remained aware of the central roles that preparation and on-going supervisory support played throughout the study.

4.9 Limitations of this study

The limitations of the study that was conducted and completed are discussed in relation to the research design, sampling approach, data analysis, the collection process and the competence of the researcher.

In terms of the research design, a shortcoming of the explorative approach is that it seldom provides satisfactory answers and may only hint at answers (Babbie, 2013). A limitation of this study with regard to the sampling approach was the size of the sample. Working within one small community of a large city (and a small purposive sample) limited its representativeness and limits the applicability of the study to the rest of the South African population. Another limitation was that the study included a sample from only the Ocean View area in the Cape Town Metropolitan area. Therefore, female learners in other regions of South Africa could have different responses altogether, although they may have the same socio-economic status.

The competence of the researcher was also a limitation as he was inexperienced in the field of research (this was the researcher's second report that he had ever conducted). This was seen in the simple mistakes made by the researcher, such as asking leading questions and not probing for more in-depth answers. Another limitation related to the language barrier, since the researcher is not a completely fluent Afrikaans-speaker (many of the female learners were first-language Afrikaans speakers). However, the various social workers assisted in translating when and where necessary. This was particularly the case during the data-collection process.

4.10 Summary

This chapter provided an outline of the methodology used in the study. The potential limitations of the study were discussed as they demonstrated the consciousness and shortcomings of the researcher in the process of the study.

The next chapter focuses on the analysis, presentation and interpretation of data collected from female learners of public primary and secondary schools in the Ocean View area.

5 Data Analysis, Presentation and Interpretation

5.1 Introduction

This chapter contains the analysis, presentation and interpretation of data collected from female learners of public primary and secondary schools in the Ocean View area in order to investigate whether inadequate or no menstrual hygiene facilities at schools contributed to high levels of absenteeism amongst female learners in schools in the Western Cape. Some of the responses were summarised and presented in form of frequencies, or yes /no answers. The results were used to make key judgments regarding the aims and various objectives of the study. As highlighted in the previous chapter, the researcher followed the structure for data analysis described by Tesch, as this method is well-documented as an appropriate approach in qualitative studies. Furthermore, Tesch's (1990) model enabled the researcher to prepare, interpret and capture the data in a systematic process, and allowed for themes and categories/subcategories to be linked across the interviews conducted.

The interpretation of the data is according to the research questions asked and data that was collected in interviews with female learners from the three different government schools in the Ocean View area. Furthermore, the presentation of the research analysis includes graphs, quotations followed by links to relevant literature, and theory. Lastly, the chapter ends with a summary.

5.2 Profile of Respondents

A profile of the female learners provides context to the experiences and understanding of these learners and their responses. The participating learners were asked to provide the following information at the beginning of the interview process:

- their age on the day of the interview;
- the grade they were in on the day of the interview;
- the approximate number of learners in their class; and
- the name of their school.

5.3 Framework for Discussion of Findings

Table 2a: The table (below) shows the responses to the following questions:

- A. Availability of sanitation facilities.
- B. Number of toilets available to the female learners.
- C. Whether the learners ever missed school as a result of the state of their menstrual hygiene facilities.
- D. The number of times their menstrual hygiene facilities were cleaned per week.
- E. The availability of bins for the disposal of used sanitary resources.
- F. Whether or not the learners considered the sanitation facilities to be private.
- G. The availability of water and basins.
- H. The availability of soap for handwashing.
- I. The learners' preference between sanitation facilities at home versus those at school.
- J. The availability of toilet paper in the sanitation facilities.
- K. The extent to which menstrual hygiene facilities are considered hygienic on a scale of 1 to 10 (1 = unhygienic and 10 very hygienic).
- L. Whether or not the learners believed that the sanitation facilities at their respective schools were safe to use.

Table 2a

| Respondent | Availability of sanitation facilities | No. of toilets available | Have you ever missed school because of the state of menstrual hygiene facilities | No. of times menstrual hygiene facilities are cleaned per week | Availability of bins to dispose of used sanitary resources | Do you consider your sanitation facilities to be private | Availability of water & basins | Availability of soap for hand washing | Preference between sanitation facilities at home VS school | Availability of toilet paper in sanitation facilities | Extent to which menstrual hygiene facilities are considered hygienic (scale of 1=unhygienic to 10=very hygienic) | Do you believe that the sanitation facilities at your school are safe to use? |
|------------|---------------------------------------|--------------------------|--|--|--|--|--------------------------------|---------------------------------------|--|---|--|---|
| A | yes | 10 | NO | 5 times a week | YES | YES | YES | NO | SAME | NO (Have to ask teacher) | | 5 Not always |
| B | yes | 12 | NO | 3 times a week | YES | YES | YES | NO | SAME | NO (Have to ask teacher) | | 5 Not always |
| C | yes | 12 | NO | at least 5 times a week | YES | YES | YES | NO | SAME | NO (Have to ask teacher) | | 5 YES |
| D | yes | 10 | NO | N/A | YES | YES | YES | NO | HOME | NO (Have to ask teacher) | | 3 Not always |
| E | yes | 9 | NO | 3 times a week | YES (Outside facilities) | YES | YES | NO | SCHOOL | NO (Have to ask teacher) | | 5 N/A |
| F | yes | 12 | NO | 5 times a week (after school hours) | YES (Outside facilities) | YES | YES | NO | HOME | NO (Have to ask teacher) | Some of the toilets were out of order during time of interview | Not always |
| G | yes | 10 | NO | 3 times a week | YES (but not adequate) | NO | YES | NO | HOME | NO (Have to ask teacher) | | 1 NO |
| H | yes | 10 | YES | 5 times a week | YES (Outside facilities) | NO | YES | NO | HOME | NO (Have to ask teacher) | | 1 NO |
| I | yes | 10 | NO | 5 times a week | YES | NO | YES | NO | SCHOOL | N/A | between 3 and 5 | NO |
| J | yes | 6 | NO | 1-2 times a week | NO | Semi-Private | YES | NO | HOME | NO | | 3 YES |
| K | yes | 10 | NO | 5 times a week | YES | NO | YES | NO | SAME | NO (Have to ask teacher) | | 8 NO |
| L | yes | 8 | NO | Every now and then | YES (All broken) | NO | YES | NO | HOME | NO (Have to ask teacher) | | 2 N/A |
| M | yes | 8 | NO | Don't know | YES | NO | YES | NO | HOME | NO (Have to ask teacher) | | 6 NO |
| N | yes | 7 | NO | Don't know | YES | NO | SOMETIMES | NO | HOME | NO (Have to ask teacher) | | 3 NO |
| O | yes | 10 (only 4 work) | NO (But doesn't use facilities at school) | 2 times a week | YES (but not adequate) | YES | YES | NO | HOME | NO | | 1 NO |
| P | yes | 10 | YES | 2 times a week | YES (but not adequate) | YES | YES | NO | HOME | NO (Have to ask teacher) | | 5 YES |
| Q | yes | 10 (2 don't work) | NO | once a week | YES | YES | YES | NO | HOME | NO (Have to ask teacher) | | 5 NO |
| R | yes | 10 | NO (But doesn't use facilities at school) | Only cleaned when dirty | YES | YES | YES | NO | HOME | NO (Have to ask teacher) | | 5 NO |
| S | yes | 10 | YES | N/A | YES | YES | YES | NO | HOME | NO (Have to ask teacher) | | 3 N/A-1 M200 |

The researcher provides an overview with regards to how the learners responded to the question highlighted in Table 2a:

a) Availability of sanitation facilities

All the learners involved in the study indicated that they had access to sanitation facilities at their school.

b) Number of toilets/latrines available to female learners

All the respondents were asked how many toilets/latrines were available for female learners at their school. They responded with the following information:

Ocean View High School:

Twelve female learners who attended Ocean View High School provided the following information:

- Seven learners (58.3%) highlighted that 10 toilets/latrines were available for female learners.
- Three learners (25%) highlighted that 12 toilets/latrines were available for female learners.
- One learner (8.3%) highlighted that nine toilets/latrines were available for female learners.
- One learner (8.3%) highlighted that seven toilets/latrines were available for female learners.

Kleinberg Primary School:

The six learners who attended Kleinberg Primary School provided the following responses:

- Three learners (50%) indicated that 10 toilet/latrines were available for female learners.
- Two learners (33.3%) indicated that eight toilet/latrines were available for female learners.
- One learner (16.6%) indicated that six toilet/latrines were available for female learners.

Marine Primary School:

The learner who attended Kleinberg Primary School provided the following information:

- Ten toilets/latrines were available for female learners.

Furthermore, although it seemed apparent to the researcher that the variations in responses indicated that one cannot be sure of the accuracy of the responses, the researcher was under the impression that perhaps it showed that the number of toilets/latrines available for female learners at their schools was not something to which the learners paid much attention.

c) Had the learners ever missed school because of the state of the menstrual hygiene facilities?

All the female learners were asked whether they had ever missed school because of the state of their respective menstrual hygiene facilities.

The graph below (Figure C) illustrates the responses obtained during the interview process:

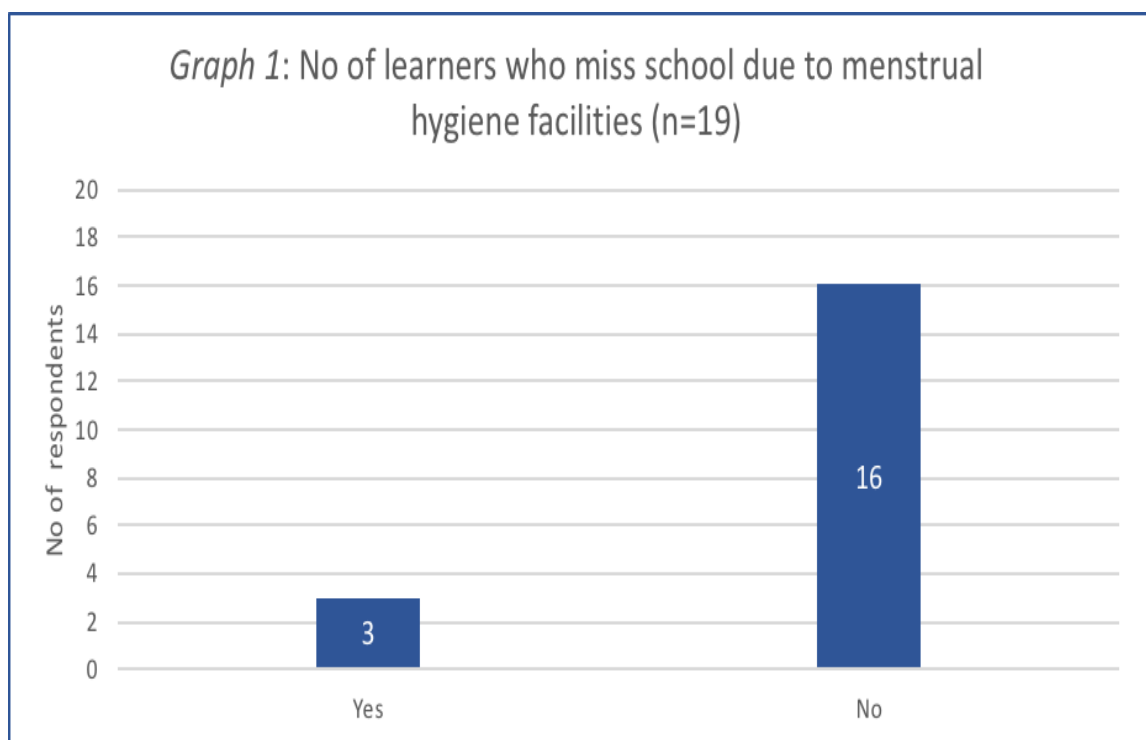


Figure C indicates that of the 19 female learners interviewed at schools in the Ocean View area only three learners reported that they had missed school because of the state of the menstrual hygiene facilities at their schools. All of these three learners attended Ocean View High School.

d) The number of times the learners' menstrual hygiene facilities were cleaned per week

When asked about the number of times the learners' menstrual hygiene facilities were cleaned per week, the following information was obtained:

Ocean View High School:

Twelve learners who attended Ocean View High School provided the following information:

- Five learners (41.7%) reported that their school's menstrual hygiene facilities were cleaned five times per week.
- Three learners (25%) reported that their school's menstrual hygiene facilities were cleaned three times per week.
- One learner (8.3%) reported that her school's menstrual hygiene facilities were cleaned twice per week.
- One learner (8.3%) reported that they did not know how many times their menstrual hygiene facilities were cleaned per week.
- Two learners (16.7%) failed to answer this question during the interview process.

The researcher could not explain the variations in the responses to this question by the 12 learners who attended Ocean View High School.

However, based on the responses, the researcher can deduce that the menstrual hygiene facilities at Ocean View High School were cleaned at least twice per week.

Kleinberg Primary School:

Six of the learners who attended Kleinberg Primary School provided the following information:

- One learner (16.7%) reported that their school's menstrual hygiene facilities were cleaned five times a week.
- One learner (16.7%) reported that their school's menstrual hygiene facilities were cleaned one to two times a week.
- One learner (16.7%) reported that her school's menstrual hygiene facilities were only cleaned when they are dirty.
- One learner (16.7%) reported that their school's menstrual hygiene facilities were cleaned every now and then.

- One learner (16.7%) reported that their school's menstrual hygiene facilities were cleaned once a week.
- One learner (16.7%) reported that she did not know how many times her school's menstrual hygiene facilities were cleaned per week.

The researcher found it difficult to deduce the number of times the menstrual hygiene facilities at Kleinberg Primary School were cleaned per week because of the variations in responses to this question.

However, the researcher was able to deduce that the toilets were sometimes cleaned to some level of cleanliness, as was indicated by five out of the six female learners (83.3%).

Marine Primary School:

The one learner who attended Kleinberg Primary School reported that the menstrual hygiene facilities were cleaned twice per week.

Furthermore, although it seemed to the researcher that the variations in responses across all the respondents showed that one cannot be absolutely certain of the accuracy of the responses. From the responses, the researcher was under the impression that this was not something to which the learners paid much attention.

e) The availability of bins for the disposal of used sanitary resources

All the female learners were asked whether or not they had bins available to dispose of used sanitary resources. The graph below (Figure E) illustrates the responses obtained during the interview process:

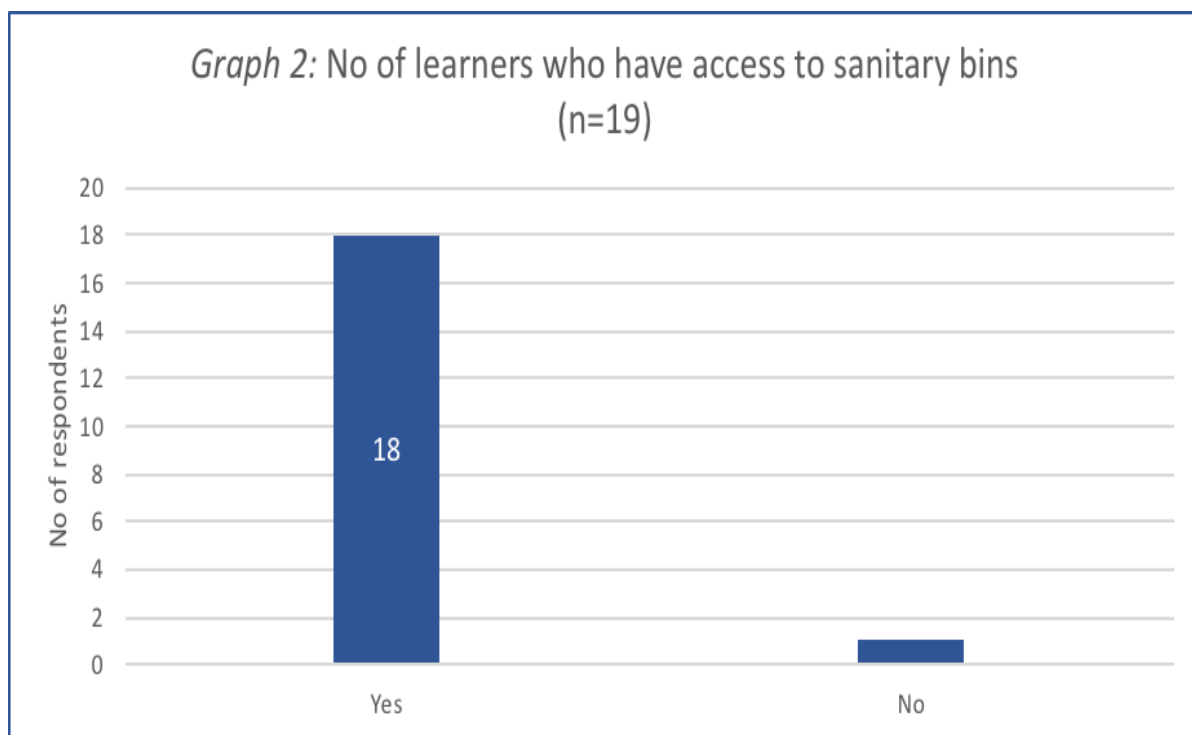


Figure E: indicates that 18 out of the 19 female learners (94.7%) reported that they did have bins for the disposal of used sanitary resources at their respective schools, with only one learner from Kleinberg Primary School reporting her school had no bins for this purpose.

f) Did the learners consider their sanitation facilities to be private?

All the learners were asked whether or not they considered their sanitation facilities to be private. The graph below (Figure F) illustrates the responses obtained during the interview process:

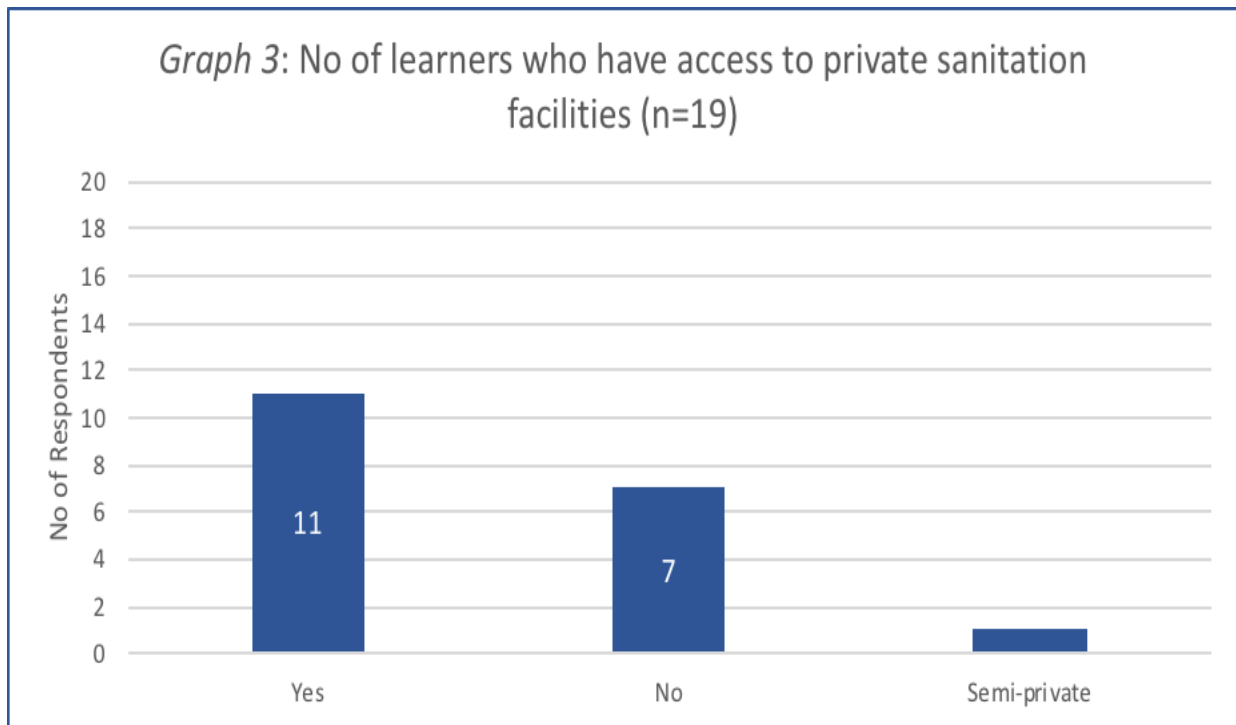


Figure F: indicates that 11 of the 19 learners interviewed (57.9%) reported that they considered the sanitation facilities at their respective school to be private. Eight of these learners (72.7%) were from Ocean View High School, two learners (18.2%) were from Kleinberg Primary School, and one learner (9.1%) was from Marine Primary School.

One learner reported that she considered the sanitation facilities at her school to be semi-private. She attended Kleinberg Primary School.

Seven learners reported that they considered their sanitation facilities at their respective schools to not be private. Four of these learners (57.1%) attended Ocean View High School, and three (42.9%) attended Kleinberg Primary School.

The researcher could not explain the variations in the learners' responses to this question. Their responses **are further explored later in this chapter.**

g) The availability of water and basins

All the 19 learners were asked whether they had water and basins available in their schools' sanitation facilities.

The graph below (Figure G) illustrates the responses obtained:

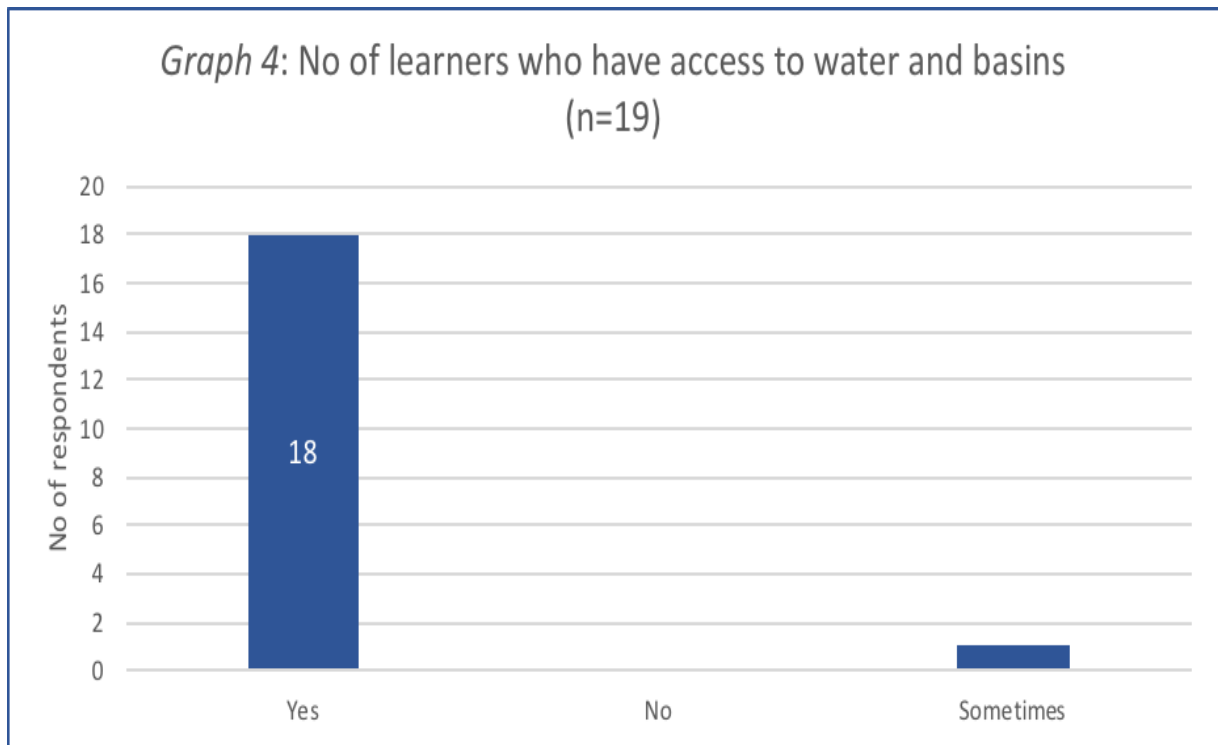


Figure G: indicates that 18 learners (94.7%) reported that they did have access to water and basins in the sanitation facilities at school, and one learner (5.3%) reported that basins were available but sometimes they did not have access to water. This learner attended Ocean View High School.

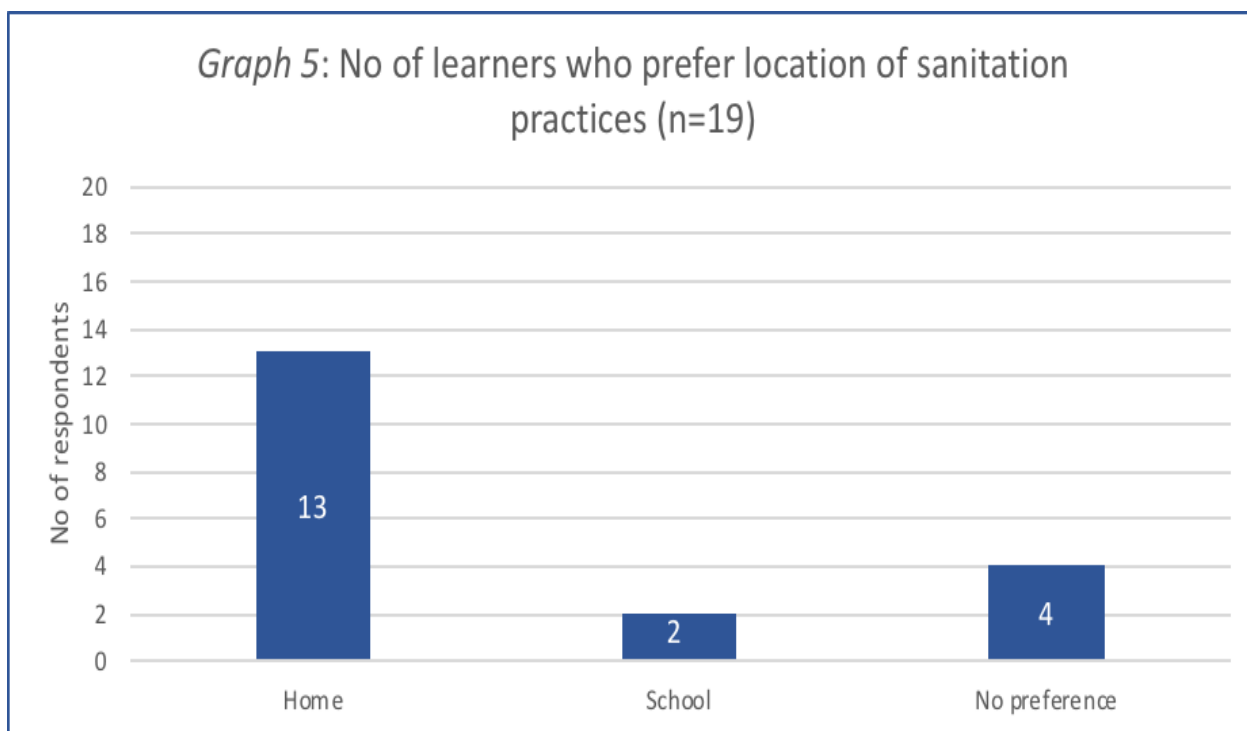
h) The availability of soap for washing hands

All the learners were asked whether there was soap available in their schools' sanitation facilities for washing their hands. All of the 19 learners (100%) reported that they had no soap available in the sanitation facilities at their schools for washing their hands.

i) Preference between sanitation facilities at home versus school

All the learners were asked whether they preferred using the sanitation facilities at home versus using the sanitation facilities at school.

The graph below (Figure I) illustrates the responses received during the interview process:



- Thirteen learners (68.4%) reported that they preferred to make use of the sanitation facilities at their home rather than school. Seven of these learners (53.8%) attended Ocean View High School, five (38.5%) attended Kleinberg Primary School and one (7.7%) was from Marine Primary School.
- Two learners (10.5%) reported that they preferred to make use of the sanitation facilities at their school rather than their respective homes. Both of the learners (100%) attended Ocean View High School.
- Four learners (21.1%) reported that they had no preference between the sanitation facilities at their home and those at their school. Three of these learners (75%) attended Ocean View High School and one (25%) was from Kleinberg Primary School.

j) The availability of toilet paper in sanitation facilities

When asked whether toilet paper was readily available in the sanitation facilities at their respective schools, 18 learners (94.7%) reported that it was not, and one learner (5.3%) failed to answer this question.

k) The extent to which menstrual hygiene facilities are considered hygienic

All the female learners were asked to report the extent to which menstrual hygiene facilities are considered hygienic on a scale of 1 (unhygienic) to 10 (hygienic) at their respective schools.

The 19 female learners at schools in the Ocean View area reported the following:

Ocean View High School:

Twelve female learners who attended Ocean View High School provided the following information:

- five learners (41.7%) rated their facilities 5 out of 10;
- three learners (25%) rated their facilities 3 out of 10;
- one learner (8.3%) rated their facilities 3 and 5 out of 10;
- two learners (16.7%) rated their facilities 1 out of 10; and
- one learner (8.3%) reported that the facilities and toilets were out of order during the time of the interview.

Kleinberg Primary School:

Six of the female learners who attended Kleinberg Primary School provided the following information:

- one learner (16.7%) rated their facilities 8 out of 10;
- one learner (16.7%) rated their facilities 6 out of 10;
- two learners (33.3%) rated their facilities 5 out of 10;
- one learner (16.7%) rated their facilities 2 out of 10; and one learner (16.7%) rated their facilities 1 out of 10.

Marine Primary School:

The learner who attended Marine Primary School rated her facilities 1 out of 10.

I) Whether or not the female learners believed that the sanitation facilities at their respective schools are safe to use

All the respondents were asked to report whether they believed that the sanitation facilities at their schools were safe to use.

The graph below (Figure L) illustrates the responses obtained during the interview process:

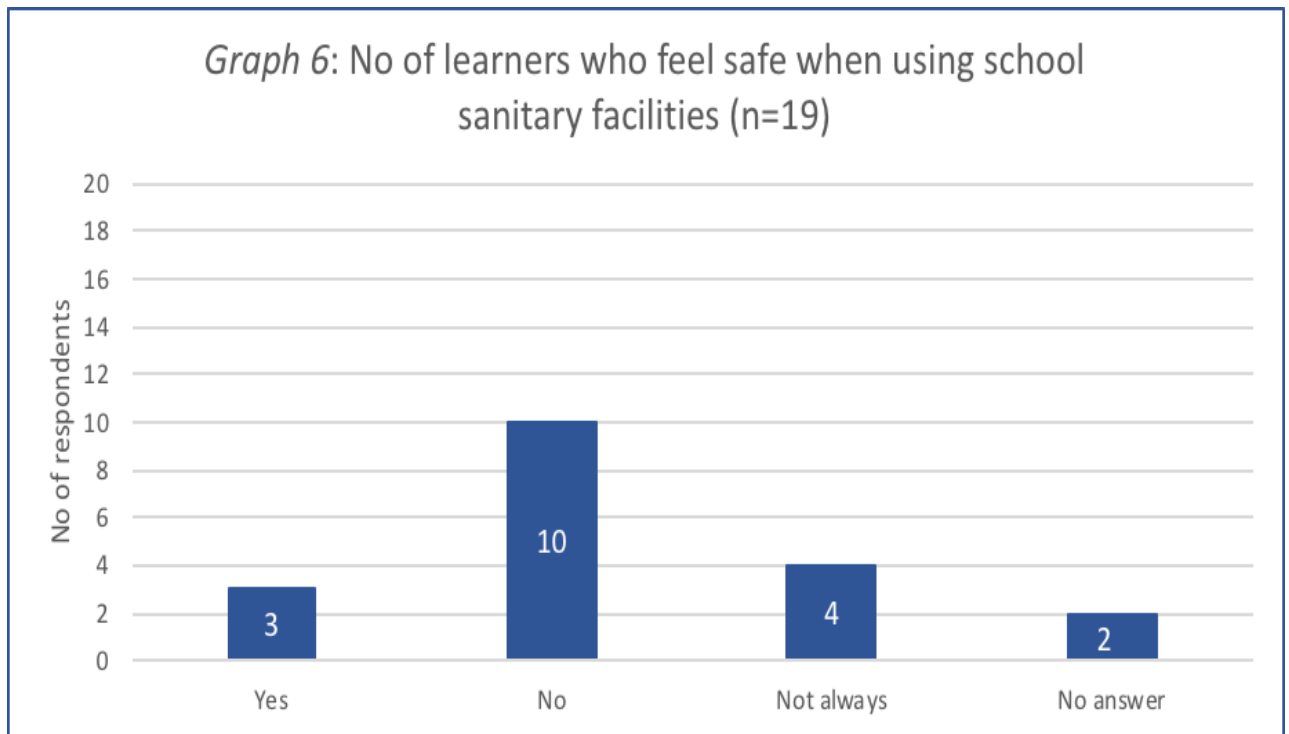


Figure L: indicates that 14 learners (73.68%) reported that their facilities were not always safe (four learners), or were not safe (10 learners) to use. Only three learners (15.8%) reported that the sanitation facilities at their schools in the Ocean View area were safe to use, and two learners failed to answer this question.

The framework (**Table 2b**) was developed through an analysis of the research data and was used to structure, present and discuss the findings of the research.

Table 2b: Framework for discussion of findings

| Themes | Categories/Sub-categories |
|--|--|
| The State of Menstrual Hygiene Facilities at Schools in Ocean View area | <p>Availability of Private Sanitation Facilities:</p> <ul style="list-style-type: none"> • Lack of privacy reduces safety and comfortability of female learners <p>Cleanliness of Menstrual Hygiene Facilities:</p> <ul style="list-style-type: none"> • Poor cleanliness contributes to the contraction of illness and diseases • Poor cleanliness contributes to female learners having to leave school • Poor cleanliness contributes to learners' inability to concentrate, learn and participate in school activities <p>Availability of Bins for Used Sanitary Resources and Toilet Paper:</p> <ul style="list-style-type: none"> • Lack of appropriate bins • Time lost from learning due to no toilet paper available in facilities <p>Availability of Handwashing Facilities:</p> <ul style="list-style-type: none"> • Inadequate investment and maintenance of basins and taps. • No soap available for handwashing. |
| Perceptions of Female Learners pertaining to Menstrual Hygiene Facilities at Schools in Ocean View area | <p>Perceptions of Female Learners regarding Menstrual Hygiene Facilities:</p> <ul style="list-style-type: none"> • Regular cleaning of toilets and facilities is needed. • Locks and privacy of toilets/latrines. • Government Officials not concerned with facilities. • Appropriate resources for handwashing is needed. |
| Best practices pertaining to sanitation facilities and menstrual hygiene management | <p>Hygiene Education and MHM in School:</p> <ul style="list-style-type: none"> • Hygiene awareness needed • Lack of concern amongst school leadership and educators • Lack of interest amongst learners <p>Role of the family in MHM in school:</p> <ul style="list-style-type: none"> • Family involvement pertaining to MHM |

5.4 Presentation and discussion of findings

This section presents the major findings of the study and makes use of the framework for analysis as represented in **Table 2a** and **Table 2b**. The study is divided into three main themes which serve as the focus of the analysis: The state of menstrual hygiene facilities at schools in the Ocean View area; the perceptions of female learners pertaining to menstrual hygiene facilities at schools in the Ocean View area; and best practices pertaining to sanitation facilities and menstrual hygiene management. The categories which emerged from these themes have been used in the analysis process.

5.4.1 The State of Menstrual Hygiene Facilities at Schools in the Ocean View area

5.4.1.1 Availability of Private Sanitation Facilities

Table 2a) shows that all the female learners involved in the study indicated that they had access to toilets/latrines in the sanitation facilities at their schools. It could be an assumption that the presence of latrines and toilets meant they are *de facto* private. However, when the female learners were asked about the availability of private sanitation facilities, this was not found to be the case. The responses to the question which refers to *the number of toilets available to the female learners at their respective schools* as reflected in **Table 2a)** indicated that although each school in the Ocean View area had at least seven toilets/latrines available in their respective sanitation facilities, this did not necessarily mean that they were private. Of the 19 female learners interviewed, only 11 (57.9%) considered the sanitation facilities at their schools to be private.

Many of the female learners interviewed across the three schools in the Ocean View area spoke of the lack of availability of private sanitation facilities:

Reduces safety and comfortability of female learners:

...sometimes they are not safe to use... (female learner A)

...not all the time but sometimes... (female learner D)

...in general they are safe to use, but sometimes they are not... (female learner F)

When asked whether she considered the sanitation facilities at her school to be private, one of the learners responded:

... No, not really... (female learner G)

Her reason for the lack of privacy was:

... The doors are broken and they do not have locks... (female learner G)

The learner provided further insight as to why the sanitation facilities were not safe and how this affected her comfort:

... The girls can't close any of the doors when they go to the toilet. Some children just come in and disturb you when you trying to use the toilet... (female learner G)

According to another respondent, the toilets were not private because:

... There are no locks on any of the doors... (female learner H)

Further responses from the female learners regarding the availability of private and semi-private toilet/latrines in their respective sanitation facilities highlighted the impact this issue had on reducing their comfort and, to a degree, their safety.

... It is semi private, the doors are broken down so we do not always feel comfortable in there... (female learner J).

...No they not private, the children stand on the toilet and look over the cubicles when we using the toilets... (female learner L).

The sentiments expressed by the female learners regarding the state of menstrual hygiene facilities at schools in the Ocean View area were closely associated with both Amartya Sen's Capability theory and the feminist theories used throughout this study. Despite progress being made in achieving gender equity globally, it is female learners who remain the most discriminated against in accessing education, and within education systems. The responses of the female learners highlighted that their safety and comfortability were negatively impacted by the absence of private sanitation facilities.

Where female learners' safety and comfortability are reduced when using menstrual hygiene and sanitation facilities, Sen would argue that this impedes on the real freedoms that people ought to enjoy (Robeyns, 2005). It is widely understood that after the family setting, schools are the most important places of learning for children, and therefore should be stimulating learning environments. Furthermore, without the appropriate menstrual hygiene facilities, adolescent female learners may be unable to remain comfortable in class (Sommer, 2010).

Feminist theories argue that society has been designed in such a way that it endorses patriarchy and neglects to address the needs, feelings, concerns and the rights of women. Most sanitation and hygiene interventions in developing countries are failing to address the needs required for female learners to manage their menstruation appropriately in the school environment. Further, the sentiments expressed by the female learners in this study reaffirm that sanitation facility design usually does not address the specific needs of women and the girl child, and where hygiene promotion programmes do exist, many exclude the issue of menstrual hygiene and fail to address issues such as

the availability of private sanitation facilities that ensure that female learners can manage their menses in a safe, comfortable and dignified manner (Roose, et al., 2015).

5.4.1.2 Cleanliness of Menstrual Hygiene Facilities

In Table 2a) it can be seen that all the female learners indicated that their menstrual hygiene facilities are cleaned on a weekly basis. This information was captured under the question that asked the number of times their menstrual hygiene facilities are cleaned per week.

It is however important to note that the researcher was unable to explain the differences in responses regarding the number of times facilities were cleaned per week at the different schools, but was able to deduce that the sanitation facilities at all three schools in the Ocean View area were cleaned at least on a weekly basis.

Weekly cleaning of sanitation facilities could lead one to assume that the facilities would be de facto hygienic. However, the female learners' responses captured during the interview process shown in **Table 2a)** with particular reference to question the extent to which menstrual hygiene facilities are considered hygienic showed that this was not the case.

All the female learners were asked to report the extent to which menstrual hygiene facilities were considered hygienic on a scale of 1 (unhygienic) to 10 (hygienic) at their respective schools. The 19 female learners interviewed at schools in the Ocean View area reported the following:

- Of the 12 female learners that attended Ocean View High School, 11 (91.7%) gave a score of 5 or less out of 10 when asked whether if they considered their respective facilities to be hygienic. The female learner that failed to provide a score reported that the facilities were in fact out of order during the time of the interview.
- Of the six female learners that attended Kleinberg Primary School, four (66.7%) gave a score of 5 or less when asked if they considered their respective facilities to be hygienic. The other two learners gave a score of 6 and 8 out of 10 respectively.
- The one female learner who attended Marine Primary School gave a score of 1 out of 10 when asked whether if she considered her school's menstrual hygiene facilities to be hygienic.

The responses indicate that the vast number of respondents believed that in terms of hygiene, the facilities were average or less than average.

The responses highlighted numerous concerns amongst the female learners pertaining to hygiene and the cleanliness of the menstrual hygiene facilities at their schools. These concerns were:

- poor cleanliness contributed to the contraction of illness and diseases;

- poor cleanliness contributed to female learners having to leave school during class hours; and
- poor cleanliness contributed to the inability to concentrate, learn and participate in school activities.

5.4.1.3 Poor cleanliness contributes to the contraction of illness and diseases.

When the female learners were asked whether they believed that their school offered sanitation facilities that were clean enough to stop the spread of sickness, some of the responses were:

... The sanitation facilities are definitely adding to the spread of sickness... (female learner D)

...No, people can definitely get sick from being in our sanitation facilities... (female learner F)

... You can get sick there in the facilities, even from just the smell, if you go there you want to leave straight away, one has to close their nose when they go in... (female learner I)

... I think people get sick because of the condition of our sanitation facilities... (female learner J)

...My one friend said that she got rashes and pimples on her bum from sitting on the toilet seat at school... (female learner L)

... It definitely helps spread the sickness... (female learner P)

... They are spreading the sickness... (female learner Q)

...People are getting sicker because of the condition of our sanitation facilities... (female learner S)

According to the female learners, although their respective schools had janitors who cleaned the facilities, they were not doing their job of cleaning the menstrual hygiene facilities adequately. Thus, the researcher was under the impression that this was a significant factor contributing to the respondent's assessment of the state of the sanitation facilities. The responses in relation to the janitors/cleaners were captured below:

...Yes we do but they do not really do their job. Sometimes we go to the sanitation facilities and they are clean while at other times they are very dirty... (female learner G)

...Yes there is but they do not clean the sanitation facilities properly, there are about three or four cleaners at the school... (female learner I)

...I do not know because I do not see how they clean the toilets... They are always dirty... (female learner N)

5.4.1.4 Poor cleanliness contributed to female learners having to be absent from school:

The female learners were asked whether they preferred using the sanitation facilities at home versus using the sanitation facilities at their respective schools. The **Table 2a)** question *the female learner's preference between sanitation facilities at home versus school* reported that:

13 out of the 19 of the female learners (68.4%) reported that they preferred to make use of the sanitation facilities at their home rather than their respective schools.

The researcher posed further questions to seek an explanation for this preference and asked the learners whether there had been situations where the state of their facilities caused the learners to miss school and/or influenced their ability to learn.

The responses of the female learners pointed to them missing out on valuable hours in the classroom as a consequence of poor cleanliness of menstrual hygiene and sanitation facilities at their schools. Many of the respondents had, at some stage, opted to leave school/class to go home because the facilities available to them at school were too unhygienic and dirty.

... I go home to use the toilet facilities, I ask my teacher and she is normally okay with this provided I go back to class afterwards... (female learner E)

...If it is that time of the month, they send us home to clean ourselves and then we come back... (female learner F)

...Not me, but my friends have had situations where they have had to go home to sort themselves out... (female learner G)

...Not me but on several occasions my friends have gone home to use the sanitation facilities there and then they come home. The teachers are very understanding of this because they know how bad the toilets are at our school... (female learner I)

5.4.1.5 Poor cleanliness contributes to an inability to concentrate, learn and participate in school activities

All the female learners involved in the study were asked if they had ever been in situation where the state of their sanitation facilities affected their ability to concentrate, learn and participate in the classroom.

...Yes I have felt uncomfortable in class because of the state of the toilets. I have had to wait until home time... (female learner D)

...Yes I have and my friends in particular... (female learner H)

... Yes this happens often. The teachers still expect us to use the sanitation facilities at the school... (female learner L)

... Yes I have... (female learner P)

...Yes I have... (female learner Q)

*According to three of the female learners involved in the study, when asked if they had ever missed school because of the condition of their respective sanitation facilities as highlighted in **Table 2a)** question: Have you ever missed school because of the state of the menstrual hygiene facilities?*

... I did the one time yes... (female learner D)

... Yes I have missed school because of this, it happens every now and then... (female learner H)

...Yes... (female learner P)

Their responses supported many of the other female learner's sentiments regarding the sanitation facilities being unhygienic and not suitable for female learners to manage their sanitary related issues.

One learner's response when asked whether she had ever missed school because of the state of the menstrual hygiene facilities was:

... I do not use the toilet facilities at school. They are really dirty... (female learner O)

In response to the same question, another learner highlighted the illnesses that learners contract from the respective facilities being dirty:

... Yes it does happen. I even get pimples and rashes from the toilet seat... (female learner S)

These responses highlighted that poor and unhygienic sanitation and menstrual hygiene facilities at school had several negative implications for female learners such as: contributing to the contraction of illness and diseases; female learners having to leave school during class hours; and the inability to concentrate, learn and participate in school activities. This impeded on female learners' ability to make the most of the educational opportunities presented to them at school.

Here, one can see the importance of Sen's Capability Approach. The Capability Approach is relevant to the study as highlighted in Amartya Sen's book, *Development as Freedom* (1999) where he acknowledges that far too many people across the world have minimal access to health care, sanitary arrangements or clean water, and as a result spend their lives fighting unnecessary morbidity, often succumbing to premature mortality. He notes that this severely restricts the 'freedoms' that women enjoy (Sen, 1999).

Furthermore, this study argues that '*development*' ought to require the removal of major sources of 'unfreedom' such as poverty, tyranny and poor economic opportunities, as well as systematic deprivation and the neglect of sanitation and menstrual hygiene facilities (Sen, 1999).

Feminism as a theoretical approach is relevant on several levels. There are reports that highlight that many schools in the developing world directly contribute to female learners' ill health by providing appalling sanitary conditions. When sanitation facilities are of an adequate standard, in which they allow for female learners to manage their menses in a private and dignified manner, school attendance rates have been seen to improve. A report compiled by World Bank (2004) shows a 20 per cent increase in school attendance rates over a four-year period. The convenience of increased access to water and adequate sanitation facilities reduced the time previously spent around these tasks by 50% - 90% (Water, 2014).

Despite progress being made in achieving gender equity globally, it is female learners who remain the most discriminated against in accessing education, and within education systems. According to Alexander et al (2014): "There are currently 57 million children worldwide, including 31 million girls who are out of school, and two thirds of illiterate adults are women."

In instances where there is inadequate access to safe water and adequate sanitation-related services, people's living standards are impacted in various ways, including education, health, nutrition, reproductive health, privacy and dignity, economic opportunities, safety and security, and personal development. Therefore, improvements in such services can create significant changes in people's lives, which will be experienced differently by women and men because of their gendered roles, responsibilities and social status within the societies they live (Sommer et al, 2016).

The South African government has admitted that its policy position remains weak with regards to addressing 'Sanitary Dignity' in the school environment. The numerous challenges associated with poor MHM, as shown in this study, may have far-reaching implications. Furthermore, the need for and importance of a comprehensive policy framework to urgently tackle the dire state of school infrastructure (especially pertaining to menstrual hygiene facilities) in thousands of South African schools could not be greater. After all, the right to basic education is a constitutional imperative, and the right to adequate sanitation facilities is a component of this imperative (Gopal and Ngubeni, 2016).

5.4.1.6 Availability of Bins for Used Sanitary Resources and Toilet Paper

Lack of appropriate bins

All the female learners involved in the study were asked about the availability of bins to dispose of used sanitary resources. The **Table 2a)** question the *availability of bins to dispose of used sanitary resources* highlights that:

Eighteen learners (94.7%) reported that they had bins to dispose of used sanitary resources at their respective schools and one learner (5.3%) reported that her school had no such bins.

When asked whether their school offered decent enough sanitation facilities to dispose of their sanitary resources, many of the female learners reported that their respective schools did not have a sufficient number of bins, and that the bins were not replaced often enough.

... We only have 3 bins available and they are really small. They do clean them, but not often... (female learner F)

... No, we do not... (female learner G)

... No, there isn't anything inside but there are bins available outside the sanitation facilities... (female learner H)

... No we don't. We don't have bins or anything like that... (female learner J)

... We have bins but there is not a lot. There is 3 bins altogether but they are broken and you can see everything inside the bin... (female learner L)

...No. We only have one bin in the toilet facilities. Sometimes it is full but at other times it is empty... (female learner O)

...Yes we do. We have one bin for the whole bathroom. But the bin is pretty full most of the time... (female learner Q)

... We only have one bin available for everyone to use. But this bin is always full... (female learner S)

The researcher was led to presume that a significant contributing factor to the menstrual hygiene and sanitation facilities at schools in the Ocean View area being unhygienic and dirty was the inadequate provisions of bins and that the bins that are provided overflow with rubbish as they are not emptied on regular occasions. Some of the responses of the female learners involved in the study are:

... No they do not. We only have one bin for everyone to use. I think this is why they throw their pads around all over the place. The children are generally very dirty... (female learner N).

... We only have one bin available. But the bin is always so full that the rubbish falls over on the floor... (female learner P).

...There are bins for this, but they are the small bins, when people get sick they just throw their pads in there without closing it. It is dirty. The bins only get replaced and emptied in the afternoon... (female learner I)

These statements by the female learners involved in the study link to the ideas surrounding feminism as a theoretical approach. In instances where there is lack of/or inappropriate menstrual hygiene facilities at schools, female learners have been found to be less likely to participate as frequently as their male counterparts in school activities. The sentiment solicited by the majority of female learners throughout the study was the feeling of discomfort in the school environment due to inadequacies in the assurance of privacy, disposal of materials for menstruation or sufficient school water and sanitation facilities. These issues are urgent because the dignity, security and education of South African children are being placed at risk. These cases continue to highlight the threat that poor sanitation infrastructure at schools poses to all learners, particularly female learners (Gopal and Ngubeni, 2016).

5.4.1.7 Time lost from learning due to no toilet paper available in facilities

All the female learners involved in the study were asked about the availability of toilet paper in their sanitation facilities. The **Table 2a**) question *the availability of toilet paper in their respective sanitation facilities* highlights that *eighteen learners (94.7%) reported that they had no toilet paper readily available in the sanitation facilities at their respective schools and one learner (5.3%) failed to answer this question.*

In their responses, many of the learners highlighted the time spent having to go and fetch toilet paper from their teachers when in need of the resource.

... Sometimes the children go to the sick room and they get toilet paper there... (female learner F)

... Yes there is, but we have to go fetch toilet paper in the class, but there is at least always toilet paper available... (female learner K)

...No there is not. We have to ask for toilet paper from our teacher in our class... (female learner L)

...We have to get toilet paper from our class, but there is always toilet paper available... (female learner M)

... No, we have to get toilet paper from our teacher... (female learner Q)

...No, we have to ask our teacher for toilet paper. There are cases when the teacher does not have but most of the time the teacher has for us... (female learner S)

One learner explained:

...There is toilet paper available because we have to bring our own toilet paper. We can't trust to keep it in the bathroom though otherwise it will get stolen... (female learner O)

The experiences shared by the respondents with regard to the lack of availability of toilet paper in their sanitation facilities showed the lack of accessibility of a critical resource that is required for adequate menstrual hygiene management in the school environment. Interventions should include the provision of the necessary resources within sanitation facilities to ensure the dignity of female learners when they are in the school environment. The literature reviewed in this study highlights that in some instances, female learners were left with no other choice but to leave school to find more acceptable menstrual hygiene facilities, consequently causing female learners to miss out on learning. The literature reviewed also indicated that a lack of accessibility of toilet paper and soap in the schools that had sanitation facilities were causing learners to contract illnesses from the toilets, also resulting in them losing time from school (United Nations International Children's Emergency Fund, 2012).

The ideas associated with this discussion are closely associated with both Sen's Capability Approach and feminist approaches. Firstly, time spent having to fetch toilet paper from the classroom impedes on female learners' ability to make the most of their educational opportunities. The lack of availability of this resource in menstrual hygiene facilities serves as a structural limitation in the way that impacts the processes that affects female learners and their ability to learn (Robeyns, 2005).

Secondly, as highlighted by the literature reviewed in the study, the Sustainable Development Goals (SDG) adopted by all United Nations member states in 2015 recognise access to water and basic sanitation services as a basic human right and have set the attainment of 'universal' and 'equitable' access to water, sanitation and hygiene related services as a target to be attained by 2030. One of the assumptions of this study is that equitable and universal access to this basic human right cannot be attainable without specific gender equality measures in water, sanitation and hygiene policies to ensure that the rights of females to water and adequate sanitation are catered for (United Nations International Children's Emergency Fund, 2012).

5.4.1.8 Availability of Handwashing Facilities

Inadequate investment and maintenance of basins and taps:

All the female learners were asked whether or not they had water and basins available in their schools' respective sanitation facilities. The **Table 2a)** question the *availability of water and basins* captures the female learners' responses to this question:

Eighteen learners (94.7%) reported that they had access to water and basins in the sanitation facilities at their respective schools, and one learner (5.3%) reported that although basins were sometimes available, they did not have access to water in their sanitation facilities.

When discussing the availability of water and basins, some of the female learners highlighted that many of the basins and taps were either broken or did not work.

... No, only a basin, but some of the taps are broken... (female Learner E)

...a lot of the basins are broken.... (female learner F)

...there are basins. But some of the taps do not work... (female learner G)

... lots of the basin taps do not work, I also reported this to my teacher, they said they would come fix it but they haven't fixed anything... (female learner J)

... Some of the basins taps do not work... (female learner L)

... only the one basin works, sometimes the water is on but sometimes it is off... (female learner M)

Two learners highlighted the impact on time lost during school hours due to the non-availability of basins and workable taps.

...Yes but only one tap works. We have to wait in a line to use the basin during busy times like intervals... (female learner O)

...we do have 4 basins. Only one works so learners have to line up to use the basins... (female learner P)

5.4.1.9 No soap available for handwashing

All the female learners were asked whether or not they had soap available in their school sanitation facilities for washing their hands. The **Table 2a)** question *the availability of soap for washing hands* captures the female learners' responses to this question:

All the female learners (100%) reported that they had no soap available in the sanitation facilities at their respective schools for washing their hands.

The female learners were expected to simply wash their hands with water.

... No we don't. We just wash our hands with water... (female learner A)

...there is no soap available... I just wash my hands with water... (female learner B)

... I don't know, I just wash my hands with water and get on with it... (female learner C)

... There is no soap... (female learner G)

... No soap... there isn't anything to wash or dry our hands... (female learner H)

... There is no soap available, one has to wash their hands with just the water from the basin... (female learner I)

... There is a basin but no soap... (female learner J)

... there is not soap in the sanitation facilities... (female learner M)

... There is no soap... (female learner N)

... No soap... (female learner P)

... No we do not have soap... (female learner Q)

... There is never soap... (female learner R)

... There is no soap... (female learner S)

Some of the female learners highlighted that the school expected the learner to bring their own hygiene product to school.

... but no soap, we have to bring our own soap to wash our hands... (female Learner D)

... There is never soap in the toilet, they told us that we must bring our own hand sanitizer... The school isn't right... (female learner F)

... The school asks us to bring our own soap... (female learner D)

.....there is no hand sanitisers or soap. We have to bring our own hygienic products from home... (female learner L)

It would appear that many of the female learners could not afford to purchase their own hygiene products and as a consequence they stole the hygiene products of other learners.

..... all the different classes have to bring their own stuff because the children steal the soap so we have to bring our own soap and leave it in the class... (female learner K)

The availability of soap and handwashing facilities is crucial to what is effectively known as ‘good’ menstrual hygiene management. ‘Good’ MHM is defined as one having access to the necessary resources (for example, menstrual materials to absorb or collect menstrual blood effectively, soap and water), facilities (a private place to wash, change and dry re-usable menstrual materials in privacy during menstruation, and an adequate disposal system for menstrual resources, from collection point to final disposal point), and sufficient education about MHM for males and females (United Nations International Children’s Emergency Fund, 2012).

The fact that schools in the Ocean View area are failing to provide soap and adequate handwashing facilities to the female learners in the Ocean View area leaves the learners open to the contraction of all kinds of illnesses, diseases and their associated costs. According to the Centers for Diseases Control and Prevention, handwashing is the single most effective way to prevent the spread of disease. Teaching children appropriate hand hygiene habits can result in the decrease of infections, absenteeism and associated costs (Centers for Disease Control and Prevention, 2000).

This discussion correlates with Sen’s Capability Approach. Sen argues that this is a source of ‘unfreedom’ as it is an unnecessary form of deprivation that hinders female learners from making the most of their education opportunities and thus advancing their respective life choices. When a person contracts illnesses and diseases from a lack of resources most would consider to be basic and crucial for the day-to-day functioning of human beings, it directly affects individual life choices. In this study, a female learner could avoid picking up illnesses if the schools had the appropriate resources necessary for correct handwashing practices to take place. This would reduce the instances where female learners pick up illnesses and diseases and miss school, losing out on educational opportunities (Sen, 1999).

5.4.2 Perceptions of Female Learners regarding Menstrual Hygiene Facilities

A series of questions were asked during the interview process to elicit the perceptions of the female learners involved in the study regarding what should be done about the sanitation and menstrual hygiene facilities at schools in the Ocean View area.

5.4.2.1 Regular cleaning of toilets and facilities was needed

All the learners involved in the study were asked what they believe should be done to improve the sanitation and menstrual hygiene facilities at their schools in the Ocean View area. Their perceptions regarding adequate and regular cleaning were captured below:

...we need spray to keep the toilets clean... (female learner A)

...I would like them to clean the sanitation facilities every day... (female learner B)

...The toilets should be cleaned every day at least... (female learner E)

...the cleaners must ensure that the facilities are clean on a regular basis... (female learner G)

... They also need to make sure that the toilets are constantly clean... (female learner J)

... I think they can clean the toilets properly and do it better... (female learner I)

...They must make sure it is always clean... (female learner M)

...the cleaners must ensure that the facilities are clean on a regular basis... (female learner G)

...They must clean them every day... especially during the course of the day... (female learner F)

... I just think they actually need to ensure that the facilities are cleaned more often... (female learner R)

... They must clean the sanitation facilities every day... (female learner S)

According to learner D, in order to ensure that the facilities were cleaned adequately and frequently, more cleaners were needed.

...There must be more cleaners to make the toilets clean or they must clean it more frequently... (female learner D).

Another point raised by two of the female learners was the importance of ensuring that the floors were mopped in their respective facilities.

...Our floors are also so dirty so it would help if they cleaned them every day... (female learner L)

...they must mop the floors ... (female learner Q).

Female learner Q was also under the impression that ensuring that the facilities were clean would also require the provision of more bins.

... Also provide more bins... (female learner Q).

According to female learner H, general improvement of hygiene should be a focal point.

... They should be more hygienic, anyone can get sick at any time... (female learner H)

Learner H also suggested that overall hygiene in the respective facilities could be improved by ensuring that the facilities smelled better.

...The facilities should smell better... (female learner H)

Female learner N was of the opinion that cleaning ought to involve the maintenance and repairs surrounding the sanitation infrastructure.

... They can clean it often, paint the walls, open and fix the windows... (female learner N)

In relation to the cleaning of the facilities at the respective schools, female learner O highlighted the importance of ensuring that the ceilings were cleaned.

...They need to clean it properly and include cleaning the ceilings also... (female learner O)

The sentiments shared by the female learners were closely linked to both Sen's Capability Approach and feminist approaches. When sanitation and menstrual hygiene facilities were not regularly cleaned, they could contribute to female learners feeling serious discomfort. This correlated with the literature reviewed where girls and women reported a feeling of discomfort in the school environment during menses due to inadequacies in the assurance of privacy, disposal of materials for menstruation, or sufficient school water and sanitation facilities. These issues are urgent because the dignity, security and education of South African children are being placed at risk. (Gopal and Ngubeni, 2016).

5.4.2.2 Locks and doors of toilets/latrines:

A key concern raised by the learners involved in the study was the safety of sanitation facilities at their schools, with 14 out of 19 (73.68%) having reported that their facilities are either not safe or not always safe. Suggestions made by the learners were that the doors should be fixed and locks fitted.

...They can at least tell the people to come and fix our toilets... locks and toilets are still broken... (female learner J)

... I would like to see all the doors fixed... (female learner L)

...It would also help if there were locks on the doors... (female learner M)

... I would like to see locks on all the doors... (female learner N)

... They must put locks and handles on the doors... (female learner O)

... They need to fix the holes in the doors... (female learner O)

... They must fix the doors... (female learner S)

Female learner G highlighted one of the reasons why it was important that the locks and doors should be fixed in the respective facilities:

... The girls can't close any of the doors when they go to the toilet. Some children just come in and disturb you when you trying to use the toilet... (female learner G)

According to female learner K, the fact that the doors of the toilets were broken contributed to the learners' discomfort when making use of the toilets.

... By some toilets they must put doors because it is uncomfortable for the children... (female learner K)

The suggestions of the female learners regarding the need for secure and private toilets confirmed the assertion of the Gender and Development Network (2016: 9) that "adequate toilets/latrines will ensure privacy and safety, and minimise embarrassment and loss to dignity – all of which can have a positive impact on a female learner's ability to make the most of their educational opportunities."

5.4.2.3 Government officials not concerned with facilities:

When the learners involved in the study were asked whether or not they were aware of officials from the government inspecting the state of the infrastructure at their schools, those that were aware of inspections noted that the sanitation facilities were never assessed.

... Yes, but they are always in the office. They are never outside. I normally see these people once a month. They only come to the school when the teachers say there is a problem... (female learner A).

...People come through but they only check the doorknobs and Wi-Fi and all that stuff but I never see them checking the sanitation facilities... (female learner I).

... The one time I saw a woman who only looked at our learning material rather than the building and that stuff... (female learner O).

...Yes, but they always in the classrooms, they never check up on the toilet facilities... (female learner S).

Female learner G highlighted that she had never seen government officials, but the same learner provided useful insight thereafter.

...No I never see anyone at our school... (female learner G).

Female learner G was then asked whether she believed that the government should be coming to the school to see the state that it is in, she responded by saying the following.

... Yes I do believe so... (female learner G).

According to female learner N, the female learners' facilities did not seem to be a priority for the government. She did, however, add that only the boys' facilities were monitored.

... No, I do not. Only when our principal was sick did the acting principal look at the boys' sanitation facilities, but not the girls'... (female learner N).

When female learner P was asked if she experienced government officials coming to her school to assess the state of the infrastructure, she responded by stating the following:

... Yes I have. Not often though... (female learner P).

As a follow-up question, female learner P was then asked whether these same officials were ever seen close to their sanitation facilities.

... No I have not... (female learner P).

The perceptions of the female learners involved in the study were that school authorities were not pro-active in managing the schools' sanitary facilities. The literature reviewed in the study highlighted the important role government ought to play with regard to ensuring that menstrual hygiene management initiatives were sustainable in the school environment.

A task required of local authorities is to assess the existing conditions across schools and consult other local stakeholders (including staff and the respective local community) to plan the necessary improvements and developments. Local authorities are required to consult with various specialists for their input with regard to plans around the developments and improvements that are desired to be made. Unlike provincial/or district authorities who must promote the allocation of funds for new developments and improvements, local authorities are required to guarantee the funding that is needed for the respective planned improvements and new developments (WHO, 2009:9).

5.4.2.4 Appropriate resources for handwashing is needed

All of respondents in the study were asked what they believe should be done to improve the state of their sanitation facilities at their schools in the Ocean View area. Several learners highlighted the need for adequate resources for handwashing.

Seven female learners involved explicitly highlighted the need for their respective schools to provide soap.

... They can put soap there... (female learner B).

... they must also buy us soap... (female learner D).

... I would also like to see soap in the bathrooms... (female learner L).

... It would help if they can put soap... (female learner N).

... I would like to see... soap available in the sanitation facilities... (female learner S).

Two learners said that in addition to soap there should be resources for drying hands.

... We need soaps, towels... (female learner A).

... They must put soap and towels in the toilets. This is all I would like to see done... (female learner R).

The need for working basins and additional basins were two factors mentioned by three of the female learners involved in the study.

... The sinks do not work... (female learner H).

... They can at least tell the people to come and fix... basins, taps... (female learner J).

... They must fix the basins and provide more basins for the girls... (female learner P).

These perceptions and suggestions indicated that the learners would have liked to see adequate facilities in place in their schools for basic hygienic practices. These learners are at risk of contracting illnesses and diseases that may lead to them being forced to miss school, consequently impacting on their right to an education. When one's right to an education is limited, other life choices become largely limited too (Sen, 1999). To ensure that women and girls have an equal chance as do men and boys at succeeding in their education, schools should cater for the basic health needs for female learners in order for them to have improved access to all forms of educational training (Clegg, 2006).

5.4.3 Best practices pertaining to sanitation facilities and menstrual hygiene management

The study involved reviewing literature and asking various questions to the female learners involved in the study to gain insight around good practices regarding sanitation facilities and menstrual hygiene management.

5.4.3.1 Hygiene Education in School

In the study, learners were asked whether they should have the opportunity to be taught the 'right' hygienic practices and whether there should more awareness of the correct hygiene related practices

at their schools. The learners' responses indicated that they would like their schools to be doing more in this regard.

... I think so... (female learner A).

...Yes there should be. They do not offer anything at the moment... (female learner B).

...They don't always teach us about these things, they only do it when someone brings it us. But they do not usually come out and speak about it... (female learner C).

... Yes there should be... (female learner E).

... Yes they should... (female learner F).

... No not really, actually no, not at all. We should definitely be taught about the things... (female learner G).

... Yes... (female learner H).

... Yes... (female learner K).

... Yes definitely... (female learner L).

... Yes, but they do teach us the basics... (female learner J).

When learner J was later asked whether there should be efforts to raise the awareness of the correct hygiene related practices at her school, her response was:

...Yes... (female learner J).

Female learner M implied that the lack of awareness programmes and lessons about hygiene was a contributing factor to her school's sanitation facilities being dirty.

... Yes so that the girls can stop making the sanitation facilities dirty... (female learner M).

... Yes I think so. They do not teach us much about this... (female learner M).

Female learner M highlights that although the school taught them about hygiene pertaining to their body, the school failed to provide education with regards to ensuring the hygiene of their sanitation facilities.

...In class they teach us about the body but they do not teach us about the toilets and the facilities... (female learner N).

...Yes, there should. They do however teach us a bit of this stuff... (female learner O)

...Yes there should be... (female learner P).

Female learner S touched on the fact that although they were taught about the correct hygiene practices, more could be done.

...Yes, we should be taught more about this although we are taught a bit at school... (female learner S).

This study reiterates that the 'quality' of a school should not solely be scored on inputs or the outcomes represented by tests scores, but rather on the processes that affected learners and their ability to learn. Furthermore, hygiene education should be included in the school curriculum, as this was a process that had the potential to affect learners' ability to make the most of their education opportunities (Robeyns, 2005).

5.4.3.2 Lack of concern amongst school leadership and educators

The learners involved in the study highlighted the lack of concern shown by their school leaders and educators regarding sanitation facilities and menstrual hygiene management.

When the learners were asked whether the educators at their schools ever monitored or assessed the state of the toilets at the respective schools, they responded as follows:

... No the teachers do not come around to visit our toilets often... (female learner A)

... there is not a platform to talk about it... (female learner B)

... Yes, we can tell our teachers but nothing gets done about it at the end of the day... (female learner G)

... the teachers force the children to use the toilet at school, they not allowed to go home in cases where they have an emergency... (female learner N)

...They do not let us go home to use the facilities there in cases of emergencies... (female learner Q)

The responses from the research participants showed that when parents or students have complained about the state of the sanitation facilities at school, the schools failed to address their concerns.

... Yes they did, but nothing changed at the school... (female learner D)

... Yes, they say nothing and nothing gets done about it... (female learner E)

... Most of the children speak to her and she takes it to the principal but he has not done anything about it... (female learner F)

... Yes, just they say nothing and do nothing... (female learner Q)

The literature reviewed in the study highlighted that a task required of local authorities is to constantly assess the existing sanitation conditions across schools and consult other local stakeholders (including staff and the respective local community) to plan the necessary improvements and developments. Local authorities are required to consult with various specialists for their input with regard to plans around the developments and improvements that are desired to be made (WHO, 2009:9).

Winkler and Roaf (2015) highlight that the lack of adequate facilities for the management of menstrual hygiene raises issues for an individual's right to privacy, human dignity and gender equality, and for non-discrimination and equality more broadly. The sentiments shared by the female learners in this study are in line with Sen's Capability Approach. Many of the female learners involved in the study highlighted a lack of concern among their respective school leadership and educators with regard to the sanitation facilities at schools being monitored, assessed and improved. This could impact the female learners' ability to make the most of the education opportunities presented to them, as menstrual hygiene management is a fundamental aspect of basic health for women and girls (Sommer, 2009).

5.4.3.3 Lack of interest amongst learners

When the female learners involved in the study were asked about matters pertaining to hygiene practices at their schools, many of the respondents attributed some of the problems to the behaviour of other learners.

... Sometimes toilet papers and resources are left on the ground... (female learner A)

... Some children wipe their 'popo' on the walls... (female learner D)

... No, they teach us enough, some of the children don't listen though, what they teaching us is not staying in... (female learner D)

... they are a part of the problem in some cases, they threw their sanitary stuff on the roof of the bathrooms and all over the floor. It is not so nice in the sanitation facilities... (female learner J)

... They children are generally very dirty... (female learner N)

... They (some other learners) kick the door open when we using the toilet. Sometimes they wipe their bums and then threw the toilet paper on the walls afterwards... (female learner O)

... They do not think about others... (female learner P)

These sentiments highlighted that poor hygiene practices at school had consequences not only for the individuals, but for all the learners that use the facilities. Furthermore, the ideas presented in this discussion were closely linked with feminist approaches. The literature reviewed in this study shows

that great success with regard to ensuring that the correct hygiene practices can take place at schools when governments focus on human development programmes that are based on an interconnected relationship between health care, education, water and sanitation departments. Women's involvement in these programmes can also prove to be pinnacle to the necessary gender equality needed. As a result, female life expectancy can increase as much as 11 years (Liljestrand and Pathmanathan, 2004).

5.4.3.4 Role of the family in MHM in school

When the female learners were asked if they understood their constitutional rights regarding access to adequate sanitation facilities, many of them indicated that they did and that they were taught these rights by members of their family.

... Someone at home told me about my rights... (female learner D)

...Yes, my grandma taught me... (female learner F)

... Yes I do, our sir and my mommy taught me about these rights... (female learner J)

...my parents at home taught me about my rights... (female learner K)

... Yes I do... parents teach us this stuff... (female learner O)

... Yes, my mother taught me this... (female learner P)

... parents have told us about this... (female learner R)

...Yes I do. My mommy taught me about this... (female learner S)

... Yes, I know but I don't know if the other girls know. My parents at home tell us about all of this and that if the school doesn't listen to us we can take it further with other people outside of school... (female learner I)

Some of the female learners discussed their family members' responses when the respondents brought up concerns in relation to the condition of their respective sanitation facilities at school.

...Yes I told my mom. But she has not mentioned it to the school before... (female learner L)

...With my mother, brother and my friends. They believe the school can do something about it. They said I must speak up about it but I have told my sir and the principal but they say they will sort it out but I'm still waiting till this day... (female learner K)

... Yes I tell them how it is at school, my parents said we must complain to the principal about the state of toilets... (female learner D)

... Yes I do. I talk to my mother, but she has never contacted the school... (female learner R)

Three of the female learners involved in the study said that although their parents complained to the school about the poor sanitation facilities, nothing changed.

...Yes they did, but nothing changed at the school... (female learner D)

...I told my gran and she went to the school and told the principal. He promised my gran that he would sort it out but it is still the same... (female learner M)

... Yes, I talked to my mommy about the sanitation facilities. She called the school but they have still done nothing... (female learner S)

One of the learners explained that although she has never discussed the state of her respective facilities with her family parents, she was aware of fellow learners who did.

... Mostly no, not at home, I do not use the sanitation facilities at school but I know friends that do but I do not know what they say... (female learner G)

One of the respondents gave the researcher the impression that her parents feel powerless about how the school is managed and that there was not a platform for parents to address concerns related to MHM at their respective children's school.

... Yes I do, they say they can't do anything because it isn't their property... (female learner H)

Some family members seemed to be unaware of the discomfort female learners had to sit through in the classroom when sanitation facilities were too unhygienic to use.

...Sometimes I tell my ma. She said I mustn't use those toilets otherwise I'll pick up sicknesses and stuff... (female learner O)

... Yes I do, they say I must not use the toilets facilities at school, I must wait till I get home... (female learner Q)

An important element for the success of hygiene-education programmes concerning sanitation related issues in schools is political will on the part of government and a commitment by key parties, such as school management, educators and learners' parents. The process of participation amongst all of these key parties would empower all individuals involved and enhance their abilities to contribute to the wider development process as new skills are learned and new norms adopted (World Bank, 1995).

5.5 Summary of findings

The study found that there are various aspects pertaining to the state of sanitation and menstrual hygiene facilities that impeded the ability of female learners making the most of education

opportunities presented to them. It was revealed in the study that, albeit not always, there are cases when inadequate menstrual hygiene facilities contributed to female learners missing out on school. The study found that although female learners might have had access to toilets/latrines in their facilities, this had not necessarily meant that the facilities are *de facto* private. The responses from the female learners revealed that a lack of private sanitation facilities reduced the safety and comfortability of the learners in the school environment. Furthermore, it was also revealed that poor cleanliness of menstrual hygiene facilities impacted on the ability of learners to make the most of their education opportunities in numerous ways, most notably: it contributed to the contraction of illness and diseases, to female learners having to leave school during class hours, and to the inability of learners to concentrate, learn and participate in school activities.

A significant contributing factor to the menstrual hygiene and sanitation facilities at schools being unhygienic and dirty was a lack of adequate bins for the safe and hygienic disposal of sanitary products, and that the bins provided were not emptied frequently, causing them to overflow with rubbish. It was also found that time from learning was being lost because the toilet facilities lacked toilet paper, and learners had to request toilet paper from their teachers.

Schools also failed to provide soap and adequate handwashing facilities, leaving female learners susceptible to the contraction of all varieties of illnesses and diseases, and the consequences such compromised health conditions.

The study also found that government officials were not assessing the state of the sanitation and menstrual hygiene facilities at public schools in Ocean View. In addition, school authorities at the schools were found to not be pro-active regarding the management of sanitation and menstrual hygiene facilities. Moreover, views of the officials who are responsible for monitoring schools are also critical. If toilets are not appropriate for menstruating girls, then it tampers with their dignity and worth. It was also revealed that platforms for parents to raise concerns related to the state of the respective facilities were largely limited. Not only was it found that the schools provided insufficient hygiene education for the learners, but that there was also a lack of interest amongst learners pertaining to the correct hygiene practices in the school setting. All the above factors were found to compromise the ability of female learner's at schools in the Ocean View area to make the most of the education opportunities presented to them.

The next chapter discusses the conclusions of the research study and provides its recommendations. It also concludes the thesis.

6 Conclusions and Recommendations

6.1 Introduction

This chapter discusses the conclusions which are drawn from the literature review and the research findings arrived at after data was collected during the field work phase of the study. This was also the empirical stage of the study when the researcher went to a particular community and interviewed sampled respondents. Therefore, its recommendations are drawn from the aforementioned process.

6.2 Main conclusions

The aim of the study was to investigate whether inadequate or no menstrual hygiene facilities at schools contributed to high levels of absenteeism amongst female learners in schools in the Ocean View area and greater Western Cape. The literature review of this research revealed that limited studies had been undertaken on the topic globally, and even less research had been completed on the topic in the Western Cape, particularly from a public policy or developmental perspective. Consequently, the researcher investigated menstrual hygiene facilities at schools in the Ocean View area with the view of determining whether the said facilities had any influence on the issue of absenteeism amongst female learners. The other intention of the study was to generate new knowledge, which would possibly contribute to public policy development so that tangible actions could be taken by the authorities to address inadequate menstrual hygiene management (MHM) at schools. It was assumed that such action would positively impact the educational opportunities of female learners.

The study made use of the Tesch model to prepare, interpret and capture the responses of the respondents in a systematic process which allowed for the themes and categories to be linked across the interviews conducted. In order to understand the challenges that female learners faced regarding menstrual hygiene facilities in the Western Cape and greater South Africa, the study sought to answer three questions:

1. What is the state of menstrual hygiene facilities in schools in Ocean View?
2. What are the views of female learners in relation to menstrual hygiene facilities at their respective schools?
3. What are the best practices pertaining to sanitation facilities and MHM?

A qualitative research design was used to gain an enriched understanding of the female learners' perceptions and experiences regarding the state of the menstrual hygiene facilities at their schools, and the influence of these facilities on their educational opportunities. It can be concluded from the learners' responses that the state of sanitation and menstrual hygiene facilities does indeed impact the female learners' ability to make the most of their education opportunities. Furthermore, the findings of the study suggest the importance of improving the state of MHM and the related facilities at schools in the Ocean View area. Menstruating schoolgirls face social stigma and negative cultural beliefs on menstruation and for such to be dealt with, both the girls and boys have to be educated about MHM. This could somewhat assist girls to feel more comfortable in managing their periods within the school environment.

The study suggests that there is a need for a comprehensive social policy approach to address the identified gaps in policies related to MHM in the South African school environment. In conclusion, recommendations emerged from the analysis undertaken by the researcher and from suggestions that were put forward by the learners who participated in the study.

6.3 Recommendations

The following recommendations emerged from the study:

6.3.1 The need to address social policy matters pertaining to MHM in the school environment

The literature reviewed in the study shows that the implementation of menstrual hygiene and sanitation-related laws and policies in South Africa is incoherent and, for the most part, left up to provincial authorities and municipalities to execute without national enforcement or regulation. In practice, national government ought to set norms and standards with regard to the implementation of policies that need to be adopted at a local and provincial government level.

Most of the references to menstrual hygiene made by the Department of Women in the Republic of South Africa (2017) focus on access to sanitary resources. South African policy documents and frameworks are mostly limited to expressing concern about the lack of adequate menstrual hygiene facilities for women and girls. However, some make recommendations, calling for sanitary facilities that are "gender-specific", but fail to specify what this entails. The current Infrastructure Norms and Standards needs to be supported and complemented by further legislation and policies aimed at promoting access to adequate menstrual hygiene facilities at schools across South Africa (Department of Women in the Republic of South Africa, 2017).

A lack of policy support may have implications for the empowerment, education, health, future employment and societal activities of girls and women. At present, the provision of adequate MHM is not properly regulated or managed. Therefore, addressing the challenges of MHM at schools will require government to introduce specific measures and structures at a national and provincial level. It will be necessary to set up structures that will be responsible for MHM at schools and other public institutions (Department of Women in the Republic of South Africa, 2017). These should be at the following levels:

6.3.1.1 National Level

National policy addressing inadequate sanitation facilities and MHM (WHO, 2009:7) should promote improved infrastructure (sanitation) in schools. The relevant national bodies or departments need to establish national standards to be reviewed annually by stakeholders. This requires an effective regulatory framework to enforce compliance with these standards, and appropriate expertise and resources for continuous assessment and planning. Furthermore, stakeholders at a national level will need to promote and fund programmes to address inadequate sanitation facilities and MHM. Another requirement of national role-players as highlighted by WHO (2009:8) is to “ensure that water, sanitation and hygiene components are adequately reflected in the Education Management Information System (EMIS) at national level.” This will include ensuring the appropriate curriculum, training and resources for teachers which are appropriate to a wide variety of school settings (WHO, 2009).

6.3.1.2 Provincial Level

According to WHO (2009:9), a key role of provincial authorities regarding inadequate sanitation facilities and MHM at schools is to raise awareness among all the key stakeholders. In addition, provincial authorities should provide locally appropriate sanitation infrastructure at schools, supported by the necessary budget, oversight and monitoring to ensure consistent application of the agreed standards in all schools at a local level. (WHO, 2009:9).

6.3.1.3 Local Levels (school and community)

WHO (2009:10) emphasises that local and school authorities are required to make a concerted effort to “mobilise support from teachers, schoolchildren, families and local stakeholders to buy into the policy adopted in order to achieve and sustain a healthy school environment”. Furthermore, local authorities need to regularly assess the existing conditions across schools and consult local stakeholders (including staff and the respective local community) and specialists in the area of sanitation infrastructure to plan the necessary improvements and developments. Moreover, unlike provincial authorities who must promote the allocation of funds for new developments and

improvements, local authorities are required to guarantee the funding that is needed for planned improvements and new developments (WHO, 2009:9).

6.3.2 Recommendations and suggestions provided by the participants in relation to MHM

This section provides suggestions and recommendations from the female learners at schools involved in the study in the Ocean View area. An **(R)** indicates that the researcher concurs with the recommendation:

6.3.2.1 Recommendations and suggestions pertaining to sanitation and menstrual hygiene facilities

Recommendation 1: Sanitation facilities be made available and be kept clean

Suggestions by learners to support this recommendation:

- Regular and adequate cleaning, including floors (preferably cleaned daily) (R)
- Availability of cleaning products (R)
- Bins be emptied regularly (R)
- Facilities be maintained and repaired (painted, windows cleaned and facilities kept in working order) **(R)**

Recommendation 2: Sanitation facilities be safe to use

Suggestions by learners to support this recommendation:

- Toilets have doors with handles and locks which are maintained **(R)**

Recommendation 3: Support for personal hygiene management

Suggestions by learners to support this recommendation:

- Hand soap and/or hand sanitising spray be readily and easily available (R)
- Towels or other forms of hand-drying be made available (R)
- There should be bathroom cleaning spray available in the sanitation facilities in order to keep them clean (R)
- All the female learners suggested that they would like to see their sanitation facilities cleaned on a regular basis (R)
- Many of the female learners recommended that the cleaners/janitors should clean the sanitation facilities adequately and regularly (R)
- Female learners also suggested that the floors in their respective facilities should be cleaned regularly (R)

- Female learners recommended that more bins need to be provided in their respective sanitation facilities for the hygienic disposal of used sanitary resources (R)
- Female learners also recommended that bins for the disposal of used sanitary resources should be replaced/emptied regularly (R)
- Female learner N recommended that cleaning the facilities ought to involve the maintenance and repairs (painting of walls, fixing windows etc.) of surrounding sanitation infrastructure (R)
- The female learners recommended that the doors, locks and handles of toilets/latrines should be fixed and fitted to ensure their safety and comfort when using sanitation facilities (R)
- All of the female learners recommended the need for appropriate resources for handwashing (particularly soap or hand sanitiser and towels to dry hands) when making use of available basins (R)
- Many of the female learners recommended that broken basins and taps be fixed, and that more basins for handwashing be made available (R)

6.3.2.2 Recommendations and suggestions pertaining to hygiene education in school

- Female learners recommended that hygiene awareness programmes should be made available to all learners (R)

6.3.3 Recommendations and suggestions provided by the researcher in relation to MHM

- Toilet paper and resources pertaining to MHM should be provided by schools.
- Sanitary resources should be made available for free to female learners at schools.
- There should be sufficient toilet paper available within the sanitation facilities at all times.
- School leadership and educators should undertake menstrual hygiene education training to ensure that the related programmes are implemented correctly.
- The parents of all learners be made aware of correct hygiene practices and of misconceptions around menstruation and the importance of early awareness around issues of menstruation for young females.
- The communities and families of female learners should ensure that discussions take place pertaining to personal hygiene practices.
- Platforms such as joint-meetings between educators, school board members and parents-teachers associations be created to ensure that parents can address school

authorities regarding their concerns and are able to follow-up in subsequent platforms to build accountability.

- A supportive environment for menstruating schoolgirls begins at home to school and it is important to also create the link between home and school for better results and accurate information.
- MHM be included in education curricula, and while female learners be the primary target, male educators and male learners also be involved in an attempt to eliminate the stigmatisation and “taboo-ness” around matters relating to menstruation.
- Rules and regulations around the use of sanitation and menstrual hygiene facilities be put in place, with mechanisms established to ensure their enforcement.
- School authorities (school management, parent associations and communities) need to acquire the necessary funding to enable schools to implement plans for maintaining school sanitation and menstrual hygiene facilities.

6.3.4 Recommendations for further study

The study demonstrated the feasibility of using the qualitative approach to investigate whether the lack of, or inadequate, menstrual hygiene facilities at schools contributed to high levels of absenteeism amongst female learners in schools in the Ocean View area and the greater Western Cape. Furthermore, the study provides recommendations for social policy interventions that would create an enabling environment for female learners to access educational opportunities and raise the awareness at schools and the surrounding communities regarding MHM.

The use of the qualitative approach revealed that inadequate menstrual hygiene facilities has an impact on the school attendance of female learners and on their ability to make the most of educational opportunities available to them. However, the qualitative approach does not accurately measure the levels of absenteeism of female learners. It is also important to note that the study was completed in a small urban area using a very small sample size. Further, while the study proved to be interesting, it was of a small scale. Therefore, it is recommended that a study using the mixed-methodological approach be used in more than one area (preferably in multiple areas with varying socio-economic status, and at schools in both rural and urban areas) in order to gain an in-depth understanding of the nature of the topic under discussion. Those conducting research in the future ought to include, the views of the officials who are responsible for monitoring schools are also critical. If toilets are not appropriate for menstruating girls, then it tampers with their dignity and worth. Furthermore, another recommendation worth noting for future research is including the perceptions of both male and female teachers as well as the male learners to gain further insight around menstrual

hygiene facilities and education opportunities for female learners in the Western Cape. Based on the literature reviewed with reference to the lack of understanding amongst male teachers regarding issues related to menstrual hygiene management in the school environment, the researcher notes that male teachers ought to be sensitive on this topic because they can also perpetuate shame but if they are also included there is likely to be more support than ridicule.

This would have greater credibility when lobbying for national policy reforms for schools not only in the Western Cape but across South Africa (WaterAid Report, 2009).

[37004 Words]

Ending Comments

The findings presented in this study highlights that there are far stretching voids in South Africa's policies pertaining to menstrual hygiene facilities, not only in the school environment but in South African society in general. As a consequence of governments neglect around menstrual hygiene management (MHM) in the school environment since 1948, millions of female learners have had their educational opportunities limited when compared to their male counterparts. The fact remains, that menstruation is a physiological condition that each and every single female has to go through for a large part of their lives, not out of choice but rather because of biological processes. Therefore, government failing to provide the necessary facilities and the related resources needed for female learners to manage their menses, is a direct infringement on the right to dignity that is bestowed amongst each and every South African living in the country and therefore serves a barrier to these learners human rights that is ought to be protected by the South African constitution.

Although it is too late to make up for the female learners who have had their educational opportunities limited by government's failure to holistically address concerns related to MHM in the school environment in the past. Today's government is presented with the opportunity to address the respective public policy gaps pertaining to MHM in the school environment, as to ensure that the female learners of the future are not dealt the same injustices as those in the past.

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8 Appendices

8.1 Appendix 1: Cover letter and consent

[Cover letter for qualitative research]

University of Cape Town

Department of Social Development

Dear participant,

I am currently studying towards a Master's degree in Social Development at the University of Cape Town, and request you to volunteer as a participant in this study.

Title of the study: "Investigating Menstrual Hygiene and Education opportunities for females in the Western Cape"

Purpose of the study: The purpose of the study is to find out if inadequate or no menstrual hygiene facilities at schools contribute to high levels of absenteeism amongst female learners in schools in the Western Cape.

Thank you for agreeing to participate in this research study.

Yours faithfully,

Informed consent

As a participant, I agree to participate in this study and I understand the following:

Procedure: I understand that my participation will involve a personal interview which will require approximately one hour of my time.

Risk and benefit: I understand that there is no financial benefit for participating in this study and that there are no associated risks. I understand that my participation will help inform research on menstrual hygiene facilities at schools in the Western Cape and potentially inform policy.

Participant's Rights: My participation in this study is voluntary and I may withdraw my participation at any time, without fear of any consequences.

Confidentiality: I understand that the interview will be recorded and that the recording will only be listened to by the researcher and my comments will remain confidential. Should I withdraw from the study, my interview will be deleted and no data from it will be used. I understand that my identity will not be identifiable from the completed questionnaire. The results from this study will be used in the researcher's Master's project and my identity will not be revealed in any publication resulting from this study.

Contact information: If I have any questions or concerns about this study or if any problems arise, I understand that I can contact Joshua Chigome on 083 661 4949 Or via email on chgjos001@myuct.ac.za at any time.

I understand my rights as a research participant and I voluntarily give my consent to participate in this study. I understand what the study is about and how and why it is being done. I have received a copy of this consent form.

I have read this consent form and have been given the opportunity to ask questions. I give my consent to participate in this study.

Participant's signature _____ Date: _____

Researcher's signature _____ Date: _____

8.2 Appendix 2: Interview Schedule

Interview Schedule:

Evaluation of Menstrual hygiene and Sanitation facilities at Schools in the Ocean View Area

Section A: General Information

1. What is your age as of today?
2. What grade are you in?
3. Number of learners in your class?
4. Name of your school?

SECTION B: HYGIENE AND SANITATION FACILITIES

- *The State of menstrual hygiene facilities at schools in Ocean View*
 1. Are there toilets in the school?
 2. What type of toilets are they?
 3. Do you consider your toilets to be in a private area?
 4. Do you ever miss school because of the condition of your sanitation/toilet facilities?
 5. Do you have separate toilets for boys and girls at your school?
 6. How many toilets are available to you in your school?
 7. Do you prefer to use the sanitation facilities/ or toilet facilities at your school or at home?
 8. How often does the janitor clean the toilet/ sanitation facilities?
 9. Is there a basin soap/and or for washing hands?
 10. Is there a toilet roll (Paper) in the toilet facilities?
 11. How often is the toilet roll being replaced?
- *Soliciting the view of female learners in relation to menstrual hygiene facilities at their schools*
 1. Do you think your school offers adequate facilities to dispose of used menstrual hygiene resources?
 2. Do you think you should have the opportunity to be taught about the appropriate hygiene habits at school?
 3. Do you think your school offers sanitary facilities that are clean enough to avoid spreading sickness?
 4. Have you ever had any experiences where the state of your sanitary facilities has influenced your ability to learn in the classroom?
 5. *Do you think that the appropriateness of the sanitary facilities at your school have contributed to you ever being unable to remain comfortable in class or at school?*
 6. To what extent do you believe that sanitation facilities at your school are hygienic? (Ask them to rate on a scale of 1-10).
 7. Do you believe that sanitation facilities are safe to use at your school?

- *Suggestions or recommendations that can be made to policy makers and education authorities to improve menstrual hygiene practices at schools*
1. What do you believe should be done to improve the state of sanitation facilities at your school?
 2. Do you believe that there should be efforts to raise the awareness around the correct hygiene-related practices at your school?
 3. Do you understand your constitutional rights concerning access to adequate sanitation facilities at your school?
 4. Do you ever discuss the state of your sanitation facilities at school to any of your family members at home?
 5. Do you ever experience people from the government visiting to check up on the structural conditions of your school?
 6. Do you have any recommendations as to how sanitation-related services can be improved at your school?

8.3 Appendix 3: Interview Transcripts

8.3.1 Female Learner A

The First session is section A General information so that I can understand where you from:

What is your name:

Female Learner A

What is your age as of today:

16 years old.

What Grade are you in:

I'm in Grade 10

Do you know approximately how many learners there are in your class:

38 I think

What is the name of your school:

Ocean View High School

Second Section: On the state of the sanitation facilities at your school:

Are there toilets in your school:

Yes

What type of toilets are there:

They are general toilets that are connected to water.

Do you consider your toilets to be in a private area:

Yes, it is in a comfortable area.

Have you ever missed school because of the condition of your sanitation facilities:

No

Do you have separate toilet facilities for boys and girls at your school:

Yes

How many toilets do you have available to you at your school:

10 toilets available

Are there all in one area:

No they are separate

Are the toilet facilities close to your school:

They are close

Do you prefer to use the sanitation facilities at home or same at your school:

The same

Do you have janitors available at your school:

There are 4 Janitors available for both the boys and girls at the school. There is a single person designated with the task of handing out the toilet paper at the school.

The janitors are all females.

How often do they clean the school:

They clean it every day. Sometime I see them cleaning it up at least 4 times a day.

Do you have a basins for bashing your hands:

Yes

Do you have soap available for washing your hands:

No we don't. We just wash our hands with water.

Don't you ever feel that you become uncomfortable with someone waiting in the toilet facility

while you are using it:

No I don't

Do you have toilet paper available in your sanitation facilities:

The toilet roll is always replaced.

Do you have any bins available:

Yes there are bins available in the toilet facilities.

Soliciting the Views of the female learner in relation to the Sanitation Facilities available at their schools.

Do you think your school offers decent enough sanitation facilities to dispose of your sanitary resources at school:

Yes

Do you think you should have the opportunity to be taught about the appropriate hygiene habits at school:

I think so.

Does your teacher ever teach you about these things:

Yes.

Do any of other girls at school mention problems about not having soap available to wash their hands:

Yes, some of the English and whitey girls complain about that stuff.

Has anything been done about these complaints:

No, they don't complain. The girls don't care, that is why they do not complain. We just wash our hands with water and get on with it.

Do you think your school offers sanitation facilities that do not spread germs and sickness:

No, not all the time, sometimes toilet papers and resources are left on the ground. The girls get shouted by the cleaners when they leave it in a mess.

Have you ever experienced any time when you felt the sanitation facilities were so dirty that it effected your ability to concentrate in class:

No.

Have you ever experienced situations where girls went home because the toilets were dirty:

To what extent do you believe your sanitation facilities are hygienic on a scale of 1 to 10:

5

Do you believe they are always safe to use:

Sometimes they are not safe to use.

Recommendations and suggestions to educators and policy makers with regard to better hygiene practices at school:

What do you believe should be done to improve the sanitation facilities at your school:

We need soaps, towels, spray to keep the toilets clean.

Do you not also believe that you should be taught about safe hygienic practices?

yes

Are you aware that you have constitutional rights around access to adequate sanitation facilities:

No, I was not aware, they have never told this to use at school.

Do you ever discuss the state of your school to family members:

No I just talk to the girls at school. None of the girls I know talk to anyone but the girls at school.

Do you ever see government officials assessing the state of the school:

Yes, but they are always in the office. They are never outside. I normally see these people once a

month. They only come to the school when the teachers say there is a problem.

Do you have toilets with the teachers at the school:

No, separate toilets.

Do they visit your toilets often:

No the teachers do not come around to visit our toilets often.

8.3.2 Female Learner B

General Information Section:

What is your name:

Female learner B

What grade are you in:

Grade 10

Do you know more or less how many learners there are in your class:

I think it is 30

What is the name of your school:

Ocean View High School

The state of Menstrual Hygiene and Sanitation Facilities available to you at your school:

Are there toilets available to you at your school:

Yes they are available

Are your toilets pit toilets or connected to a water system:

They are connected to piped running water.

Do you consider the toilets to be in a private area:

Yes

Have you ever missed school because of the condition of your sanitation facilities:

No

Do you have separate toilets for the girls and boys at your school:

Yes

How many toilets are available to you at your school:

12 for boys and 12 for girls

Do you prefer to use the toilets at your school or at home:

I prefer to use both.

Do you have janitors at the school:

Yes, we have about 5 janitors for the boys and the girls

How often do they clean the toilets at school:

3 times a week. I do feel that they should be cleaning it more. I would like them to clean the sanitation facilities everyday.

Is there a basin for washing your hands at school:

Yes there is a basin for washing our hands at school, but there is no soap available.

So how do you wash your hands if there is no soap available:

I just wash my hands with water.

Is there toilet paper available at your toilet:

Yes, we have to ask for toilet paper from the person who stands in the toilet all the time.

Do you not feel uncomfortable knowing that there is someone else at the toilet:

Yes, I feel comfortable, I trust them.

Would you not feel it would be better having the toilet roll there so that you can take it yourself:

I feel someone should be there. Otherwise you go to the toilet and it is all used up. Someone has been standing in the toilets since I've been at the school.

Soliciting the view of sanitation facilities in relation to the female learners

Is there bins and etc. for you to through away your sanitary resources:

Yes

Do you feel there are enough bins:

Yes, every toilet has its own bin.

Are they always clean and empty:

They not always clean and empty, I'm not too sure how often they are cleaned.

Do you feel your school should be teaching you about the importance of safe hygiene practices:

They do it, but it largely depends on the children. The principle and teachers teach us about these practices.

Do you feel your sanitation facilities are clean enough to stop the spreading of sickness:

I don't know. The toilets are clean but the toilets do not flush properly. Some of them do not flush properly.

Do you bring it up with the teachers:

No one brings it up with the teachers.

If you don't complain about it, how do you expect them to know:

I do not know. No one ask us about it, there is not a platform to talk about it.

Was there ever a time when the state of your facilities were in such a poor state that you felt you had to go home and then come back to school:

No.

Have you ever had issues around where your sanitation facilities have put you in a situation where you have remained unable to remain comfortable in class:

No.

To what extent do you believe the sanitation facilities are clean on a scale of 1 to 10:

I think it is both. I think to be a 5.

Do you believe that the sanitation facilities at your school are safe to use:

Not always

How come:

Because they are dirty.

If they have so many janitors, do you believe that there is any reason for the facilities to be dirty:

It's not a problem for me because I do not use the toilets so often.

Recommendations and suggestions to educators and policy makers on the state of hygiene practices

How do you believe sanitation facilities can be improved at your school:

They can clean it every day and put soap there. They can also fix the toilets so that they flush properly.

Do you believe that there should be efforts to raise the awareness of the correct hygiene practices:

Yes there should be. They do not offer anything at the moment.

Do you understand your constitutional right concerning access to adequate sanitation facilities at your school:

No, I didn't know this. The school has never told us this.

Has anyone at your home discussed your rights with regard to access to sanitation facilities at your school:

No

Do you and the girls at your school discuss the state of your sanitation facilities:

No

Do you ever experience people from the government checking up on the condition of your school:

No, not at all.

Do you have any recommendation as to how sanitation services can be improved at your school:

There should be more bins available. I'm not happy about the state of the facilities. There should be better I'm just not too sure how they can actually be improved.

8.3.3 Female Learner C

General Information Section A:

What is your name:

Female learner C

What grade are you in:

I'm in grade 11

How many learners are in your class:

31 learners

What school do you attend:

Ocean View High School

Section B: On the state of the sanitation facilities at your school

Are there toilets at the school you attend:

Yes

Are they pit toilet or normal flush toilets connected to water:

Yes, they are regular toilets that are connected to water

Are the sanitation facilities in a private area in your school:

yes they are

Have you ever missed school because of the conditions of your sanitation facilities:

No, I haven't

Do you have separate facilities for the boys and girls at your school:

Yes we have different sections for the boys and girls at the school

Are the sanitation facilities far away from the school building:

No they are not far away from the school area.

How many toilets are available to you at your school:

there are about 12 separate toilets for the girls and boys at the school

Do you prefer to use the toilet facilities at your school or at your home:

I prefer to use both equally as much

Do you have cleaners or janitors at your school:

Yes, we have quite a few, they just got more recently.

Why do they have so many people cleaning your toilets:

I don't know

How often do they clean the toilets:

Everyday, sometimes twice a day

Are there basins and soap available in the sanitation facilities:

Yes there is a basin, but there is no soap available

Do you have running water for washing your hands:

Yes

How do they expect you to wash your hands without soap:

I don't know, I just wash my hands with water and get on with it.

Is there toilet paper available in your sanitation facilities:

Yes there is, but there is always someone in the sanitation facility handing out the toilet paper, they sit there the whole day handing out the toilet paper.

How do you feel about that:

No it's fine that they there. It ensures that there is always toilet paper available.

Do you not feel uncomfortable knowing that someone else is in the sanitation facility while you are using it:

No

Soliciting the view of the female learner in relation to the sanitation/hygiene facilities at your school:

Do you think your school offers enough resources to dispose of your used sanitary resources:

Like bins and stuff... yes and they clean it also

Do you think you should have the opportunity to be taught the 'right' hygienic practices at your school:

They do, we have assemblies where they always tell us to keep ourselves clean. They do this at every assembly.

Do you not find it odd that your schools keeps telling you to stay clean yet they do not have soap and other resources available at your school:

Yeah

Do you think your school offers sanitation facilities that are clean enough to concentrate while you at school:

I think so, but the school does tell us to bring our own stuff to make sure that we stay clean and do not get sick.

Has anyone said anything about the fact that they do not offer soap or any other resources to make sure that you germ free:

No.

Have you ever had any experiences where the state of your facilities has effected your ability to stay comfortable in class.

No not me, but I do know of other girls.

What do they do:

They just keep it in until the end of school

How do they learn like that:

I do not know

To what extent do you believe that the state of your sanitation facilities at your school are clean on a scale of 1 to 10:

5

Do you believe that the sanitation facilities at your school are safe to use:

Yes

Section C: Recommendations and suggestions to educators and policy makers

What do you believe should be done to improve the state of your sanitation facilities at your school:

Maybe they can put more bins and put the toilet there so that one can use it as they please.

Do you believe that there should be efforts to raise the awareness around the right hygiene practices at your school:

They don't always teach us about these things, they only do it when someone brings it us. But they do not usually come out and speak about it.

Do you understand your rights concerning access to adequate sanitation facilities at your school:

Yes I do

Do you ever experience people from the government coming to check up on the conditions of your school:

No

Do you believe people from the government should be coming:

Yes, so that the can actually see what our needs are.

Do you not believe that there should be a platform for learners to voice their concerns about the

state of the sanitation facilities at your school:

Yes I think so, no one at the school is doing this.

Do you have any suggestions as to what can be improved at your school concerning sanitation facilities:

They should sanitary resources available in the sanitation facilities. There are many instances when a child has to go home to clean themselves and then go back to school. The school allows this but you have to leave your bag at school so that they know you will come back to school

8.3.4 Female Learner D

Section A: General information about Participant:

Name:

Female learner D

How old are you as of today:

I am 14 years old

What grade are you in:

I'm in grade 8

Do you know more or less how many learners there are in your class:

Ummm, about 45

What is the name of your school:

Ocean View High School

Section B: General information about Hygiene and Sanitation facilities at Ocean View High School:

Are there toilets available at your school:

Yes

What type of toilets do you have available at your school:

Are they piped toilets or pit toilets: They are flushed Toilets

Do you consider your toilets to be in a private area:

Yes it is private, I feel comfortable there

Tell me, do you ever miss school because of the state of your sanitation facilities:

No

Have you heard of any of your friends missing school because of the toilets being dirty or broken:

No

Do you have separate toilets for girls and boys:

Yes

Are they far from one another:

Yes

If you had to guess how many toilets you have available for all the female girls at your school, how many would you say there are:

5 on one side and 5 on the other side.... 10 altogether yes

Do you prefer to use the toilet facilities at your school or do you prefer to use the one's at home:

I prefer to use the ones at home:

Why do you prefer to use the ones at home than at school:

They broken at school and they are dirty. Some children wipe there 'popo' on the walls.

Tell me, on that note, do you have janitors at your school:

Yes,

How often do they clean the toilets, once a week, a few times a day or what:

I don't know

How many Janitors do you have:

We have a lot, about 5. We have a lot of people there.

Tell me, how come the toilets are so dirty if you have so many cleaners:

I don't know yeah

Are there basins and soap at your school:

There are basins, but no soap, we have to bring our own soap to wash our hands. The school asks us to bring our own soap.

Soap is very expensive, how do expect you to bring your own soap:

They wrote letters to our parents, telling us what toiletries we need to bring to school, like soap and toilet paper

Do you think your school should be providing these resources:

Yes I do think so.

Is there also toilet paper available at your school:

Yes there is toilet paper available.

Is there always toilet paper available:

Yes there is always toilet paper available, it is locked in a special room. If we need toilet paper we need to go ask the Miss, and she gives us one piece of toilet paper.

Has there ever been a situation where they have refused to give you toilet paper:

No, they always give us toilet paper

Do you prefer this system, I'm sure it helps ensure that there is always toilet paper:

It is okay yeah

Section C: Soliciting the female learners view in relation to the sanitation facilities at your school

Do you think your school offers facilities to dispose of your used sanitary resources:

Yes our school has bins to through away our bins, but there are only a few available.

Are the bins in the sanitation facilities or are they outside:

They are inside

Do you believe you should have the opportunity to be taught the correct hygiene practices at school:

Yes they teach us this stuff.

Do you think they teach you enough or would like to be taught about it more:

No, they teach us enough, some of the children don't listen though, what they teaching us is not staying in

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

The sanitation facilities are definitely adding to the spreading of sickness

Have you had any personal experiences when the sanitation facilities have been so bad that you haven't been able to focus in class:

Yes I have felt uncomfortable in class because of the state of the toilets. I have had to wait until home time.

Have you ever missed school because of the state of your sanitation facilities:

I did the one time yes

Is your school not aware that lots of female learners find the toilets dirty that they can't go to school:

No, the school knows this. Some teachers have helped us out personally in some cases because the pads and stuff is too expensive. Some other learners bring extra and share with the learners.

Do you ever discuss the state of your sanitation facilities with family members at home:

Yes I tell them how it is at school, my parents said we must complain to the principle about the state of toilets.

Have your parents contacted the school:

Yes they did, but nothing changed at the school.

To what extent do you believe your sanitation facilities are hygienic on a scale of 1 to 10:

It is below average... Very low... like a 3 out of 10.

Do you believe that your sanitation facilities at school are safe to use:

Yes, not all the time but sometimes.

Section D: Suggestions and recommendation to educators and policy makers

What do you believe should be done to improve the state of your sanitation facilities at your school:

There must be more cleaners to make the toilets clean or they must clean it more frequently, they must also buy us soap and toilet paper in the toilet so that children can use it as they please.

Do you understand your constitutional right with regards to access to adequate sanitation facilities:

Yes

Who taught you this:

Someone at home told me about my rights.

Do you ever experience people from the government checking up on the condition of your school:

No I never see anyone.

Do you have any other recommendation to how sanitation related services can be improved:

No

8.3.5 Female Learner E

Section A: General Information about Female Learner:

What is your name:

Female learner E)

What is your age:

14

What grade are you in:

Grade 8

Do you know how many learners are in your class:

30 something, early 30s

What is the name of your school:

Ocean View Secondary High School

Section B: state of hygiene and sanitation facilities at school:

Are there toilets at the school that you attend:

Yes

What type of toilets are they:

They are normal flush toilets

Do you consider your toilets to be in a private area:

Yes,

Have you ever missed school because of the condition of your toilet facilities:

No

Do you have separate toilets for the boys and girls:

Yes,

Are they far from one another:

They are far yes

How many toilets are available to you at the school if you had to guess:

About 9 all in all

Do you prefer to use the sanitation facilities at your school or at home:

At school

Are there janitors at your school:

Yes

If you had to guess, how often do they clean the toilet facilities at school:

About 3 times a week sir, they clean them in the morning only

Is there a basin and sap available to wash your hands:

No, only a basin, but some of the taps are broken.

Have you ever complained to tell the teachers that you don't have soap and that the basins are broken:

Yes, they say nothing and nothing gets done about it

Is there toilet paper available in your sanitation facilities:

Yes

How often are the toilets rolls replaced:

Everyday sir, there is a person outside the bathrooms who gives us toilet paper, I would prefer there toilet paper to be in the toilet so that I can use it when I want.

Section C: Soliciting the view of the female learner in relation to the sanitation facilities available at their school

Do you think your school offers adequate sanitation facilities to dispose of your used sanitary resources:

Yes, they have bins but they are outside the sanitation facilities.

Do you not feel awkward having to go outside to dispose of your sanitation pads:

Yes, bins inside would help this problem

Do you feel you should have the opportunity to be taught the correct hygiene practices at school:

Yes, but they do teach us this stuff in class. Our LO teacher taught us this

When the toilets are dirty do you ever mention it to teachers:

No I have never done that.

Do you think your school offers sanitation facilities that are clean enough to avoid the spreading of sickness:

No. I do not think so

Have you ever had any experiences where the state of your sanitation facilities has influenced your ability to concentrate in class:

Yes

What have you done under those circumstances:

I go home to use the toilet facilities, I ask my teacher and she is normally okay with this provided I go back to class afterwards

To what extent would you say your toilet facilities are hygienic on a scale of 1 to 10:

5, sometimes it is very clean, and at other times it is very dirty

Section D: Recommendations and suggestions made by female learners in relation to the hygiene and sanitation facilities available at school

What do you believe should be done to improve the state of the sanitation facilities at your school:

The toilets should be cleaned everyday at least.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at school:

Yes there should be.

Do you understand your constitutional rights concerning access to adequate sanitation facilities:

Yes, my sir taught me these rights.

Do you ever discuss the state of the sanitation facilities at your school with your family members:

No

Do you discuss this with your friends:

No

Do you ever experience people from the government coming to take a look at the infrastructure and conditions at your school:

Yes I do.

What do they do when they come around:

They fix the stuff in the school.

Do you have any further suggestions as to how sanitation related services can be improved at your school:

No

8.3.6 Female Learner F

Section A: General Information about Female Learner

What is your name:

Female learner F

What is your age as of today:

15

What grade are you in:

Grade 8

Do you know more or less how many learners there are in your class:

50 something but I think it is 48 now, all the grade 8 classes are big yeah

What is the name of your school:

Ocean View High Secondary School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes there are toilets

What type of toilets are they:

It is like normal toilets, but they bigger. There are lots of cubicles

Do you consider your toilets to be in a private area:

Yes I do

Have you ever missed school because of the condition of your sanitation facilities at school:

No

Do you have separate toilets for boys and girls:

Yes

Are your toilets quite far away from the school structure:

No, there is a door thingy down with classrooms and the girl's toilets is at the back while the boy's toilets are at the front. The boys and girls toilets are far from one another.

How many toilets are available to you at your school if you had to guess:

There are about 12 or 13 toilets for the girls

Do you prefer to use the sanitation facilities at your school or the ones at home:

The one's at home

Why do you prefer to use the sanitation facilities at home compared to school:

The children have dirty sickness also and they leave their stuff in the toilets, their pads and stuff. There isn't bins available in the toilets, they only outside the toilet facilities.

Are your bins replaced often or are they always dirty:

We only have 3 buns available and they are really small. They do clean them, but no often.

Do you have janitors/ cleaners at your school:

Yes

How often do they clean your toilet facilities:

They normally clean the sanitation facilities when the school is out... after school

Do you have basins and soap available for washing your hands:

There is no soap but there are basins

Are all of your basins working:

No, a lot of the basins are broken.

Have you brought it up with your teachers that the basins are broken:

No I have not.

Is there toilet paper available in the sanitation facilities:

Every interval the cleaner stands outside the sanitation facilities with toilet paper.

What happens if you need to use the toilet during class:

Sometimes the children go to the sick room and they get toilet paper there.

What would you prefer, if they had toilet paper in the sanitation facilities that you could take as you please or going to the office:

For me, it must always be available in each cubicle. If there is not, sometimes children forget to go get the toilet paper.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

There are big black bins outside to get rid of our stuff.

Do you think they should be outside:

No they should be inside, it will be better if they are in the facilities so that when you finished in the toilet then you know that you can just put it in the bin.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

They do teach us this.

But surely if they teach you this they should be providing the necessary resources to ensure that you remain hygienic:

There is never soap in the toilet, they told us that we must bring our own hand sanitizer...

The school isn't right

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

No, people can definitely get sick from being in our sanitation facilities:

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

No, not actually. But if it is that time of the month, they send us home to clean ourselves and then we come back.

So this means that you inevitably ended up missing out on class:

Yes that is the case

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

At this moment in time some toilets are out of order...

How long does it take to fix the toilets when they are out of order:

No, we don't know but it takes a long time. Sometimes they fix it, sometimes they leave it.

That is how the sickness comes.

Do you believe that the sanitation facilities at your school are safe to use:

In general they are safe to use, but sometimes they are not

Section D: Recommendations and suggestions to be made to educators and government officials.

What do you believe should be done to improve the state of sanitation facilities at your school:

They must fix the toilets and clean them everyday... especially during the course of the day

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes they should.

Does your school provide any form of workshops or presentations on the importance of the correct hygiene practices:

No they do not, but our teacher does talk about it.

So do you tell your teacher about the problems you highlighted earlier in relation to the state of the hygiene facilities at your school:

Most of the children speak to her and she takes it to the principle but he has not done anything about it.

Do you understand your constitutional rights with regard to access to sanitation facilities:

Yes, my grandma taught me.

Do you ever discuss the state of your sanitation facilities with any of your family members:

No

Lauren, do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

No, I only see workers from the school walking around fixing the windows and etc.

8.3.7 Female Learner G

Section A: General Information about Female Learner

What is your name:

Female learner G

What is your age as of today:

16

What grade are you in:

I'm in grade 10

Do you know more or less how many learners there are in your class:

37 learners are in the class

What is the name of your school:

Ocean View Secondary High School

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools:

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are normal toilets connected to water and they flush but some of the stuff is broken.

Do you consider your toilets to be in a private area:

No, not really.

Why is that the case:

The doors are broken and they do not have locks.

Have you brought this up with the teachers at school:

I haven't but some of the other children complained but the teachers did nothing about it.

Have you ever missed school because of the condition of your sanitation facilities at school:

No

Do you have separate toilets for boys and girls:

Yes we do

Are your toilets quite far away from the school structure:

The first section is boys and then there is a bit of a walk to the girl's sanitation facilities

Do you feel safe having to use the sanitation facilities at your school:

Yes I do feel safe

How many toilets are available to you at your school if you had to guess:

I really do not know but if I had to guess somewhere between 8 and 10 toilets

Do you prefer to use the sanitation facilities at your school or the ones at home:

At home.

Why do you prefer to use the sanitation facilities at home compared to school:

At school the sanitation facilities are dirty... it is horrible

Do you have janitors/ cleaners at your school:

Yes we do but they do not really do their job. Sometimes we go to the sanitation facilities and they are clean while at other times they are very dirty.

How often do they clean your toilet facilities:

Maybe about 3 times a week. This isn't enough for a school with over a 1000 learners

Do you have basins and soap available for washing your hands:

There is no soap but there are basins. But some of the taps do not work

Are all of your basins working:

Some of them do not work

Is there toilet paper available in the sanitation facilities:

Yes there is, someone stands at the sanitation facilities and hands out the toilet paper as you need it. But this does ensure that there is always toilet paper available.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

No, we do not.

Do you think they should be outside:

No, a lot of girls feel uncomfortable about this

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

No not really, actually no not at all. We should definitely be taught about the things.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

No the sanitation facilities are not clean, they are always dirty-dirty. But I have never experienced being sick because of the dirtiness of the sanitation facilities.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Not me, but my friends have had situations where they have had to go home to sort themselves out.

So this means that you inevitably ended up missing out on class:

Yes that is the case, but the teachers are aware of this.

What do the teachers say:

I do not know

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

A 1 out of 10

Do you believe that the sanitation facilities at your school are safe to use:

No, I do not believe that they are safe to use.

Why would say that are not safe:

The girls can't close any of the doors when they go to the toilet. Some children just come in and disturb you when you trying to use the toilet.

Section D: Recommendations and suggestions to be made to educators and government officials.

What do you believe should be done to improve the state of sanitation facilities at your school:

I think girls need to be cleaner about how they use the facilities. Girls must use the bins and the cleaners must ensure that the facilities are clean on a regular basis.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes there should be.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I know, our teacher told us about this stuff when we complained about things at the school in the past

Is there a platform to complain about the condition about the sanitation facilities at the school:

Yes, we can tell our teachers but nothing gets done about it at the end of the day.

Do you ever discuss the state of your sanitation facilities with any of your family members:

Mostly no, not at home, I do not use the sanitation facilities at school but I know friends that do but I do not know what they say

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

No I never see anyone at our school

Do you believe that the government should be coming to the school to see the state that it is in:

Yes I do believe so.

8.3.8 Female Learner H

Section A: General Information about Female Learner

What is your name:

Female learner H

What is your age as of today:

16

What grade are you in:

I'm in grade 8

Do you know more or less how many learners there are in your class:

There are about 60 learners in my class

What is the name of your school:

Ocean View Secondary High School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are general toilets connected to pipe water

Do you consider your toilets to be in a private area:

No, it is not private

Why is that the case:

There are no locks on any of the doors

Have you ever missed school because of the condition of your sanitation facilities at school:

Yes I have missed school because of this, it happens every now and then

Do you have separate toilets for boys and girls:

Yes

How many toilets are available to you at your school if you had to guess:

About 10 toilets

Do you prefer to use the sanitation facilities at your school or the ones at home:

I prefer to use the ones at home

Why do you prefer to use the sanitation facilities at home compared to school:

Its cleaner I have privacy at home

Do you have janitors/ cleaners at your school:

Yes we do, we have about 2 cleaners who clean the sanitation facilities

How often do they clean your toilet facilities:

They clean it every week, about every Friday.

Do you have basins and soap available for washing your hands:

No soap, the basins have water but there isn't anything to wash or dry our hands.

Is there toilet paper available in the sanitation facilities:

If you enter the sanitation facilities there is a lady you gives you only one piece of toilet paper (a single ply). It very uncomfortable because someone is always there while you wanting to use the facilities in private.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

No, there isn't anything inside but there are bins available outside the sanitation facilities

Do you think they should be outside:

No, there should be bins available in every single toilet

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

No I do not think so.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes I have and my friends in particular. There have been cases where the toilets have been dirty and not nice.

So this means that you inevitably ended up missing out on class:

Yes that is the case, but the teachers are aware of this, the school is corrupt. They never listen to us.

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

A 1. The facilities are really bad at our school

Do you believe that the sanitation facilities at your school are safe to use:

No they are not safe to use

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They should be more hygienic, anyone can get sick at anytime. The sinks do not work, there isn't enough toilet paper... The facilities should smell better. We also desperately need bins.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes there should be, the teachers sometime mentions this stuff but more can be done

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I am, my LO sir taught me this stuff

Do you ever discuss the state of your sanitation facilities with any of your family members:

yes I do, they say they can't do anything because it isn't their property.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

No, I do not.

8.3.9 Female Learner I

Section A: General Information about Female Learner

What is your name:

Female learner I)

What is your age as of today:

16

What grade are you in:

Grade 10

Do you know more or less how many learners there are in your class:

35

What is the name of your school:

Ocean View Secondary High School

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes but they very dirty

What type of toilets are they:

They connected to pipe water

Do you consider your toilets to be in a private area:

No, its fine there but they don't clean it properly so when the kids are sick, they never want to go to the sanitation facilities

Have you ever missed school because of the condition of your sanitation facilities at school:

No, only when I'm sick

Do you have separate toilets for boys and girls:

Yes, boys is separate and girls is separate, the sanitation facilities are quite far away from one another

Do you feel safe having to use the sanitation facilities at your school:

How many toilets are available to you at your school if you had to guess:

I think it is about 10 toilets for the girls

Do you prefer to use the sanitation facilities at your school or the ones at home:

At school, I do not go to the school toilets unless I'm sick and I really have to go for example if I have my period.

Why do you prefer to use the sanitation facilities at home compared to school:

The facilities are dirty we have to bring our own toilet paper from home to use at school

Do you have janitors/ cleaners at your school:

Yeah there is but they do not clean the sanitation facilities properly, there are about 3 or 4 cleaners at the school.

How often do they clean your toilet facilities:

Only after first break or second break or when everyone has gone home

Do you have basins and soap available for washing your hands:

There is no soap available, one has to wash their hands with just the water from the basin.

Is there toilet paper available in the sanitation facilities:

Yes, there is a person who hands out toilet paper at the first interval otherwise we have to bring our own toilet paper.

Do you complain to the teacher about it:

Yes, they just tell us we must bring our own stuff to school.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

There is bins for this, but they are the small bins, when people get sick they just throw their pads in there without closing it. It is dirty. The bins only get replaced and emptied in the afternoon

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes we are taught about this. The LO and Natural Science teacher tells us about this sort of things. The principle knows about this stuff but he just walks past the facilities and does nothing... it is almost like he does not care.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

You can get sick there in the facilities, even from just the smell, if you go there you want to leave straight away, one has to close their nose when they go in.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Not me but on several occasions my friends have gone home to use the sanitation facilities there and then they come home. The teachers are very understanding of this because they know how bad the toilets are at our school. (and Blue)

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

Every day you smell the dirt and you see the pee. I would give it a 5 or a 3

Do you believe that the sanitation facilities at your school are safe to use:

Yes they are generally safe to use

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

I think they can clean the toilets properly and do it better. The student leaders need to bring these issues up with the teachers, they never come back to us with an answer when we ask them. We can go to the principles wife to ask but it is scary.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

I think so yes

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes, I know but I don't know if the other girls know. My parents at home tell us about all of

this and that if the school doesn't listen to us we can take it further with other people outside of school.

Do you ever discuss the state of your sanitation facilities with any of your family members:

Yes I do.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

People come through but they only check the doorknobs and Wi-Fi and all that stuff but I never see them checking the sanitation facilities.

8.3.10 Female Learner J

Section A: General Information about Female Learner

What is your name:

Tameaga Corka J

What is your age as of today:

13

What grade are you in:

7

Do you know more or less how many learners there are in your class:

41

What is the name of your school:

Kleinberg Primary

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are normal piped water toilets

Do you consider your toilets to be in a private area:

It is semi private, the doors are broken down so we do not always feel comfortable in there.

Have you ever missed school because of the condition of your sanitation facilities at school:

No

Do you have separate toilets for boys and girls:

Yes

Do you feel safe having to use the sanitation facilities at your school:

Yes

How many toilets are available to you at your school if you had to guess:

About 6 toilets altogether

Do you prefer to use the sanitation facilities at your school or the ones at home:

I prefer to use the one's at home

Why do you prefer to use the sanitation facilities at home compared to school:

The toilets at school isn't in a nice state but at home it is much better.

Do you have janitors/ cleaners at your school:

We only have one lady that cleans the toilets, but the other cleaners are busy with other things

How often do they clean your toilet facilities:

Once maybe twice a week only.

Do you have basins and soap available for washing your hands:

There is a basin but no soap, but lots of the basin taps do not work, I also reported this to my teacher, they said they would come fix it but they haven't fixed anything.

Is there toilet paper available in the sanitation facilities:

No we have to bring our own from home. When we start our new grade they give us a list of all the things we need to bring to school on a daily basis.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

No we don't. We don't have bins or anything like that.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes, but they do teach us the basics.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

No they don't. I think people get sick because of the condition of our sanitation facilities.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes,

So this means that you inevitably ended up missing out on class:

No, I go to the teacher's bathroom in emergencies

What about the other girls:

The other girls use the sanitation facilities, but they are a part of the problem in some cases, they through their sanitary stuff on the roof of the bathrooms and all over the floor. It is not so nice in the sanitation facilities.

To what extent do you believe that the sanitation facilities at your school or clean on a scale of 1-10:

Most of the time the sanitation facilities are dirty. I would say it is a 3 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

No

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They can at least tell the people to come and fix our toilets, they have only re-painted the toilets but the basins, taps, locks and toilets are still broken. They also need to make sure that the toilets are constantly clean and that there is toilet paper available.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I do, our sir and my mommy taught me about these rights.

Is there a platform to complain about the condition about the sanitation facilities at the school:

Yes, through our teachers and Student leaders

Do you ever discuss the state of your sanitation facilities with any of your family members:

With my mother, brother and my friends. They believe the school can do something about it. They said I must speak up about it but I have told my sir and the principle but they say they will sort it out but I'm still waiting till this day.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school: No

8.3.11 Female Learner K

Section A: General Information about Female Learner

What is your name:

Female learner K

What is your age as of today:

12

What grade are you in:

7

Do you know more or less how many learners there are in your class:

43

What is the name of your school:

Kleinberg Primary School

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are flush toilets connected to water

Do you consider your toilets to be in a private area:

No, some toilets do not have doors and locks but some are private yes,

Have you ever missed school because of the condition of your sanitation facilities at school:

No I have not

Do you have separate toilets for boys and girls:

Yes we do

Do you feel safe having to use the sanitation facilities at your school:

Yes

How many toilets are available to you at your school if you had to guess:

I think we have about 10 altogether

Do you prefer to use the sanitation facilities at your school or the ones at home:

I do not mind. I do not mind use both

Do you have janitors/ cleaners at your school:

Yes, we have 2 cleaners who clean the sanitation facilities

How often do they clean your toilet facilities:

They clean them everyday

Do you have basins and soap available for washing your hands:

Yes there is a basin, all the different classes have to bring their own stuff because the children steal the soap so we have to bring our own soap and leave it in the class.

Is there toilet paper available in the sanitation facilities:

Yes there is, but we have to go fetch toilet paper in the class, but there is at least always toilet paper available

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

Yes, we have bins for this stuff in the toilet facilities. The bins are replaced fairly often

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

We know to about keeping clean, we have poster around the school telling us how to stay hygienic. They also discuss this stuff in assemblies at school

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

The facilities are always clean

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

No I have not

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

8 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

Yes I do

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

By some toilets they must put doors because it is uncomfortable for the children... This is the only thing I would like to see improved.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I know this. The teachers and my parents at home taught me about my rights

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

Yes I do, I also see them talking to the teachers about how the children work. I see people there at least once a month. When the school is out these people have meeting with the teachers.

8.3.12 Female Learner L

Section A: General Information about Female Learner

What is your name:

Female learner L

What is your age as of today:

12

What grade are you in:

7

Do you know more or less how many learners there are in your class:

44

What is the name of your school:

Kleinberg Primary School

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are flush toilets, but some toilets do work

Do you consider your toilets to be in a private area:

No they not private, the children stand on the toilet and look over the cubicles when we using the toilets. I've told the teachers that this is a problem but they just simply tell the learners that they must not do this. Also, some of the toilet doors are broken

Have you ever missed school because of the condition of your sanitation facilities at school:

No, never.

Do you have separate toilets for boys and girls:

Yes we do

Are they far away from one another:

No, they right next to one another.

How many toilets are available to you at your school if you had to guess:

About 8 toilets altogether, but not all of them work.

Do you prefer to use the sanitation facilities at your school or the ones at home:

I prefer the toilet facilities by the house. It is cleaner and safer and I feel more comfortable

Do you have janitors/ cleaners at your school:

We just have one lady who cleans the sanitation facilities for the girls and two cleansers who clean the boys sanitation facilities.

How often do they clean your toilet facilities:

Every now and then. Sometimes they make us learners clean up the sanitation facilities ourselves when it gets dirty. One time some man asked us to mop up the floors in the sanitation facilities.

Do you have basins and soap available for washing your hands:

Some of the basins taps do not work and there is no hand sanitizers or soap. We have to bring our own hygienic products from home

Is there toilet paper available in the sanitation facilities:

No there is not. We have to ask for toilet paper from our teacher in our class.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

We have bins but there is not a lot. There is 3 bins altogether but they are broken and you can see everything inside the bin.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes I do. They do teach us the basics.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

My one friend said that she got rashes and pimples on her bum from sitting on the toilet seat at school.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes this happens often. The teachers still expect us to use the sanitation facilities at the school.

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

Our sanitation facilities are filthy. I would say a 2 out of 10

Do you believe that the sanitation facilities at your school are safe to use:

No not at all.

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

I would like to see all the doors fixed, I would also like to see soap in the bathrooms. It is also important that they put more bins and also put toilet paper in the bathrooms. Our floors are also so dirty so it would help if they cleaned them everyday. They also need to teach the children the importance of keeping the facilities clean because they are also to blame.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes definitely.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

No I do not.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

Yes I told my mom. But she has not mentioned it to the school before.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

I saw people come once since I've been at the school.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

No I do not.

8.3.13 Female Learner M

Section A: General Information about Female Learner

What is your name:

Female learner M

What is your age as of today:

12

What grade are you in:

5

Do you know more or less how many learners there are in your class:

41

What is the name of your school:

Kleinberg Primary School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are flush toilet connected to water

Do you consider your toilets to be in a private area:

No, many of the doors are broken or do not have locks

Have you ever missed school because of the condition of your sanitation facilities at school:

No

Do you have separate toilets for boys and girls:

Yes

Are they far away from one another:

No they are right next to one another.

How many toilets are available to you at your school if you had to guess:

8 toilets for the girls at the school

Do you prefer to use the sanitation facilities at your school or the ones at home:

At home, because it's clean at home whereas at school they are filthy

Do you have janitors/ cleaners at your school:

Yes we do, we have 2 people that clean the facilities.

How often do they clean your toilet facilities:

I do not know, but the toilets are clean sometimes and at other times they are dirty

Do you have basins and soap available for washing your hands:

Yes but there is not soap in the sanitation facilities.

Is there toilet paper available in the sanitation facilities:

We have to get toilet paper from our class, but there is always toilet paper available

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and menstrual hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

Yes we have bins for this stuff, there is a bin in each cubicle. The bins are generally empty.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

We are taught about this. Our LO teacher teaches us this stuff.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

No,

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

I would say a 6 out of 10

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They must make sure it is always clean and also ensure that there is toilet paper in the facilities. It would also help if there were locks on the doors

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes so that the girls can stop making the sanitation facilities dirty.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I do, my teacher taught me about my rights.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

I told my gran and she went to the school and told the principle. He promised my gran that he would sort it out but it is still the same.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

Yes I do.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

No I do not.

8.3.14 Female Learner N

Section A: General Information about Female Learner

What is your name:

Female learner N

What is your age as of today:

13

What grade are you in:

8

Do you know more or less how many learners there are in your class:

40

What is the name of your school:

Ocean View High Secondary High School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

Normal flush toilets but some of the toilets are out of order... They do not flush.

Do you consider your toilets to be in a private area:

No I don't, the children kick the door open when you using the toilets and the teachers do nothing about this.

Have you ever missed school because of the condition of your sanitation facilities at school:

No.

Do you have separate toilets for boys and girls:

Yes we do.

How many toilets are available to you at your school if you had to guess:

About 7 but 4 are out of order for over 1000 children at our school.

Do you prefer to use the sanitation facilities at your school or the ones at home:

The ones at home. The toilet facilities at school are dirty. Children throw pads on the floor and the ceilings all the time.

Do you have janitors/ cleaners at your school:

I do not know because I do not see how they clean the toilets... They are always dirty

How often do they clean your toilet facilities:

I do not know

Do you have basins and soap available for washing your hands:

There is no soap, only the one basin works, sometimes the water is on but sometimes it is off.

Is there toilet paper available in the sanitation facilities:

Yes, a lady hands it out during intervals. But when intervals is over, they do not give us toilet paper. We have to bring our own toilet paper from home.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and menstrual hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

No they do not. We only have one bin for everyone to use. I think this is why they throw their pads around all over the place. They children are generally very dirty.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes I think so. They do not teach us much about this. In Class they teach us about the body but they do not teach us about the toilets and the facilities.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

No, the toilets are always stinking.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

I do not use the sanitation facilities at school, I always wait until I get home, I have seen my friends have problems though. But the teachers force the children to use the toilet at school, they not allowed to go home in cases where they have an emergency. It so bad man, the school tends to look after the boys sanitation facilities better than they do than our facilities.

To what extent do you believe that the sanitation facilities at your school or clean on a scale of 1-10:

I give it a 3 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

No, not really.

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They can clean it often, paint the walls, open and fix the windows. It would help if they can put soap and bins in every toilet. Lastly, I would like to see locks on all the doors.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes there should be.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

No I do not know.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

No I do not. I just chat to my friends about it but none of us use the toilets at school anymore.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

No I do not. Only when our principal was sick did the acting principal look at the boy's sanitation facilities but not the girls.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

8.3.15 Female Learner O

Section A: General Information about Female Learner

What is your name:

Female learner O

What is your age as of today:

13

What grade are you in:

Grade 7

Do you know more or less how many learners there are in your class:

32

What is the name of your school:

Marine Primary School

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

They are normal flush toilets that are connected to water. 6 out of the 10 toilets are out of order. Only 4 are working at the moment.

Do you consider your toilets to be in a private area:

It is in a private area.

Have you ever missed school because of the condition of your sanitation facilities at school:

I do not use the toilet facilities at school. They are really dirty.

Do you have separate toilets for boys and girls:

Yes we do

How many toilets are available to you at your school if you had to guess:

10 altogether but only 4 work.

Have you mentioned this to the teachers that the toilet are not working:

No, the teachers just walk past.

Do you prefer to use the sanitation facilities at your school or the ones at home:

The one's at home. They are much cleaner than the one's at school. If you at school you have to lift up your feet because it is so dirty. There is toilet paper and mud all over the floors.

Do you have janitors/ cleaners at your school:

Yes, 2 by the girls and two by the boys.

How often do they clean your toilet facilities:

Twice a week

Do you have basins and soap available for washing your hands:

Yes but only one tap works. We have to wait in a line to use the basin during busy times like intervals

Is there toilet paper available in the sanitation facilities:

There is toilet paper available because we have to bring our own toilet paper. We can't trust to keep it in the bathroom though otherwise it will get stolen.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

No. We only have one bin in the toilet facilities. Sometimes it is full but at other times it is empty.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes we are taught this at school, they also told us not to drink the water. We have to bring our own water from home to drink.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

It is dirty and people are getting sick. A lot of the girls are getting boils and rashes because the toilets are not clean.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes, it hard, sometimes I mess on myself a little bit because I do not want to go to the toilet facilities at school. Many of my friends have had to go home from school to sort themselves out and then the learners come back afterwards.

To what extent do you believe that the sanitation facilities at your school or clean on a scale of 1-10:

1 out of 10. The toilets never flush.

Do you believe that the sanitation facilities at your school are safe to use:

No.

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They must put locks and handles on the doors. They must by toilet paper because we give money to the school. They need to fix the holes in the doors. They need to clean it properly and include cleaning the ceilings also.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes, there should. They do however teach us a bit of this stuff.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I do, our school and parents teach us this stuff.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

Sometimes I tell my ma. She said I mustn't use those toilets otherwise I'll pick up sicknesses and stuff.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

The one time I saw a women who only looked at our learning material rather than the building and that stuff.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

No

8.3.16 Female Learner P

Section A: General Information about Female Learner

What is your name:

Female learner P

What is your age as of today:

14

What grade are you in:

Grade 8

Do you know more or less how many learners there are in your class:

Between 30 and 40

What is the name of your school:

Ocean View Secondary High School

Section B: State of the sanitation and menstrual hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

Normal Flush toilets not all of the toilets are working, 5 out of the 10 toilets do not work.

Do you consider your toilets to be in a private area:

Yes

Have you ever missed school because of the condition of your sanitation facilities at school:

Yes

Why is that:

They are too dirty.

And any of your other friends:

Yes

Do you have separate toilets for boys and girls:

Yes

How many toilets are available to you at your school if you had to guess:

10 but 5 do not work.

Do you prefer to use the sanitation facilities at your school or the ones at home:

At home. For all the reasons I mentioned before

Do you have janitors/ cleaners at your school:

2 at the girls and 1 at the boys.

How often do they clean your toilet facilities:

2 days a week, but it would be better if they cleaned it more

Do you have basins and soap available for washing your hands:

No soap, but we do have 4 basins. Only one works so learners have to line up to use the basins.

Have you told your teachers this:

No.

Is there toilet paper available in the sanitation facilities:

Yes we do, but people stand outside the bathroom to hand you toilet paper.

Are they there throughout the whole day:

No, they only there during intervals.

What happens if you need to use the sanitation facilities during the day:

Then we need to go to the office and ask them and then they say no we cannot go.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

We only have one bin available. But the bin is always full that the rubbish falls over on the floor.

How often does this happen:

Everyday

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes they teach us this already.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

It definitely helps spread the sickness.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes I have.

Do you have situations like this often:

Not often.

And your friends, does this happen to them:

Yes

Do they let you go home cases of 'emergencies' to use the toilet at home:

No, they don't let us go home

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

Sometimes dirty and sometimes okay. I would say a 5 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

No.

Why is this:

They (some other learners) kick the door open when we using the toilet. Sometimes they wipe their bums and then through the toilet paper on the walls afterwards.

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

More toilet paper in the toilet facilities. They must fix the basins and provide more basins for the girls.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes there should be

Do they teach you about this:

Yes they do in Life Orientation.

Then why do some children act in such inappropriate way:

They do not think about others

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes, my mother taught me this

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

No not really.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

Yes I have. Not often though.

Have you ever seen them close to your sanitation facilities:

No I have not.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

8.3.17 Female Learner Q

Section A: General Information about Female Learner

What is your name:

Female learner Q

What is your age as of today:

12

What grade are you in:

Grade 6

Do you know more or less how many learners there are in your class:

In the 40s

What is the name of your school:

Kleinberg Primary School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

Normal Flush Toilet, but some of them do not work

Do you consider your toilets to be in a private area:

Yes

Have you ever missed school because of the condition of your sanitation facilities at school:

No, I always go to school.

Do you have separate toilets for boys and girls:

Yes

Are they far away from one another:

Yes

How many toilets are available to you at your school if you had to guess:

10 altogether for the girls but I think about two are not.

Have you mentioned this to the teachers that the toilet are not working:

Yes, just they say nothing and do nothing

Do you prefer to use the sanitation facilities at your school or the ones at home:

At home, they one's at school are very dirty. They do not let us go home to use the facilities there in case of emergencies.

Do you have janitors/ cleaners at your school:

Yes we do, we have one

How often do they clean your toilet facilities:

Maybe once a week.

Do you have basins and soap available for washing your hands:

No we do not have soap. But we do have basins.

Is there toilet paper available in the sanitation facilities:

No we have to get toilet paper from our teacher.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and menstrual hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

Yes we do. We have one bin for the whole bathroom. But the bin is pretty full most of the time.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes they do teach us this.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

They are spreading the sickness.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes I have

Do you have situations like this often:

No not often

And your friends, does this happen to them:

Yes it does.

Have you told the teachers:

Yes, but they say nothing

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

5 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

Yes I think so.

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They must keep the toilets clean, provide more toilet paper, they must mop the floors and also provide more bins.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes

Do they teach you about this:

Yes they do a bit

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes, my teacher taught me this.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

Yes I do, they say I must not use the toilets facilities at school, I must wait till I get home

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

No I have not.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

8.3.18 Female Learner R

Section A: General Information about Female Learner

What is your name:

Female learner R

What is your age as of today:

12

What grade are you in:

7

Do you know more or less how many learners there are in your class:

43 learners

What is the name of your school:

Kleinberg Primary School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes

What type of toilets are they:

Normal flush toilets connected to water

Do you consider your toilets to be in a private area:

Yes I do.

Have you ever missed school because of the condition of your sanitation facilities at school:

No, I do not use the toilet at school. I wait until I come home.

Do you have separate toilets for boys and girls:

Yes we do.

How many toilets are available to you at your school if you had to guess:

We have 10 for the girls but some of them do not work and some of the toilets do not have working doors.

Do you prefer to use the sanitation facilities at your school or the ones at home:

At home, because we do not have adequate sanitation at school.

Do you have janitors/ cleaners at your school:

Yes we have people. There are about 2 or 3 people who clean the facilities.

How often do they clean your toilet facilities:

Every afternoon if the facilities are dirty.

Do you have basins and soap available for washing your hands:

There is never soap but we do have working basins.

Is there toilet paper available in the sanitation facilities:

No, we have to ask our teacher for toilet paper. There are cases when the teacher does not have but most of the time the teacher has for us.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

Yes, we have bins available that are replaced fairly often.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes we are taught this stuff. But I do think we should be taught more about it.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

Yes I think so. I have seen children getting sick because of the smell.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes I do experience this.

Do you have situations like this often:

Not most of the time but I do experience this

And your friends, does this happen to them:

Yes it does.

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

It is sometimes clean and sometimes dirty. I would say a 5 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

No

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They must put soap and towels in the toilets. This is all I would like to see done.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

No, I just think they actually need to ensure that the facilities are clean more often.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes, our teachers and parents have told us about this.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

Yes I do. I talk to my mother, but she has never contacted the school.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

Yes I think so.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school:

8.3.19 Female Learner S

Section A: General Information about Female Learner

What is your name:

Female learner S

What is your age as of today:

14

What grade are you in:

Grade 8

Do you know more or less how many learners there are in your class:

Around 30

What is the name of your school:

Ocean View High School

Section B: State of the sanitation and hygiene facilities in Ocean View Schools

Are there toilets available at the school you attend:

Yes there are

What type of toilets are they:

Normal flush toilets connected to water, but only one of the 10 toilets has a lock.

Do you consider your toilets to be in a private area:

Yes.

Have you ever missed school because of the condition of your sanitation facilities at school:

Yes, about once a month.

Do you have separate toilets for boys and girls:

Yes

How many toilets are available to you at your school if you had to guess:

10 altogether.

Do you prefer to use the sanitation facilities at your school or the ones at home:

The one's at home because it is cleaner.

Do you have janitors/ cleaners at your school:

No we do not

Do you have basins and soap available for washing your hands:

There is no soap but we do have running water with basins.

Is there toilet paper available in the sanitation facilities:

It is only available at intervals. If we need it during class we need to go fetch a key from the lady to open the bathroom. She doesn't always give toilet paper during the day, she only gives us at intervals.

Section C: Soliciting the views of the female learner in relation to the state of the sanitation and hygiene facilities in Ocean View Schools

Do you think your school offers adequate facilities to dispose of your used sanitary resources:

We only have one bin available for everyone to use. But this bin is always full.

Do you think the school should be giving you the opportunity to be taught about the correct hygiene practices:

Yes we should be taught more about this although we are taught abit at school.

Do you think your school offers sanitation facilities that are clean enough to stop the spreading of sickness:

People are getting more sick because of the condition of our sanitation facilities.

Have you ever been in a situation where the state of your sanitation facilities has effected your ability to learn in the classroom:

Yes it does happen. I even get pimples and rashes from the toilet seat.

To what extent do you believe that the sanitation facilities at your school are clean on a scale of 1-10:

It is mostly dirty I would say a 3 out of 10.

Do you believe that the sanitation facilities at your school are safe to use:

No.

Section D: Recommendations and suggestions to be made to educators and government officials

What do you believe should be done to improve the state of sanitation facilities at your school:

They must clean the sanitation facilities everyday. They must fix the doors. I would like to see toilet paper and soap available in the sanitation facilities.

Do you believe that there should be efforts to raise the awareness of the correct hygiene related practices at your school:

Yes, more can be done here.

Do you understand your constitutional rights with regard to access to adequate sanitation facilities:

Yes I do. My mommy taught me about this.

Do you ever discuss the conditions of your sanitation facilities at your school with your family members:

Yes, I talked to my mommy about the sanitation facilities. She called the school but they have still done nothing.

Do you ever experience officials from the government coming through to access the state of your infrastructure at your school:

Yes, but they always in the classrooms they never check up on the toilet facilities.

Do you have any recommendations or suggestions of what you would like to see improved with regard to the hygiene practices at your school: